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ABSTRACT

The purpose of this practicum was to develop an on-site training program for latchkey family day care home providers. Practicum objectives were to (1) develop a pilot project involving three family day care homes in Pinellas County, Florida; (2) assist caregivers in meeting the annual training requirements; (3) design and implement, on-site, a caregiver's training program; (4) help caregivers plan and implement activities meeting children's developmental needs; (5) establish on-site training programs in all the latchkey family day care homes in Pinellas County; and (6) develop a system of evaluation to measure the effectiveness of the training program. As a result of the on-site training program, the caregivers were able to meet their annual training requirement. Related materials are appended. (Author/RH)

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ON SITE TRAINING AND PROGRAMMING
FOR FAMILY DAY CARE HOMES

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NOVA UNIVERSITY

ON SITE TRAINING AND PROGRAMMING FOR FAMILY DAY CARE HOMES

by

MADELINE ROSE

Cluster 17

A Practicum Report Presented to the Ed.D. Program
in Early Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1985

PRACTICUM APPROVAL SHEET

This practicum took place as described.

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Approved:

April 20, 1986
Date of Final Approval of Report

Polly Peterson, Ph.D.
(Type Name and Degree, Reviewer)

Polly Peterson, Ph.D.

Dedication

Nancy Otte

Training/Program Director

Direct Services Division

Latchkey, Inc.

A good Listener and Kindred Spirit

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ABSTRACT

On-Site Training and Programming for Family Day Care Homes, Rose, Madeline J. 1986: Practicum Report, Nova University Ed.D Program in Early Childhood.
Descriptors: Family Day Care, Day Care, Infants, Young Children, Employed Parents, Child Caregiver (Child Rearing, Child Care [prior to Mar. 80])

The developmental needs of the children in Family Day Care homes were not being met due to lack of training on the part of the caregivers. Caregivers cannot leave the site to take advantage of workshops offered during the day and have little energy for taking classes at night. Family responsibilities and lack of transportation also make it difficult to leave the home and attend training classes. The purpose of this practicum was to develop an on-site training program for Latchkey Family Day Care Home Providers.

The writer's goal was to create a good child development program in family day care homes, implemented by a knowledgeable caregiver and planned with a specialist, in order to meet the needs of the individual children in the home. The objectives were: (1) To develop a pilot project involving three family day care homes in Pinellas county in Florida; (2) To assist the caregiver in meeting the annual training requirement; (3) To design and implement a Caregiver's Training Program on-site; (4) To help the caregiver plan and implement activities that would meet the developmental needs of the children in the home; (5) To establish on-site training programs in all the Latchkey Family Day Care Homes in Pinellas County; (6) To develop a system of evaluation to measure the effectiveness of the training program.

As a result of the on-site training program, the caregivers were able to meet their annual training requirement. Other events that followed included: Activity Workshops for children in the homes, an Inservice Day, participation by the Site Manager and her assistant in local "Baby Fairs", a Parent Satisfaction Survey and the development of a Monthly Newsletter and Career Ladder for the caregivers.

CHAPTER I

INTRODUCTION

Description of Community, including Socio-Economic and Geographic Factors

Pinellas County is located on the suncoast of Florida. There are approximately 755,937 people living in the county. The county covers 280 square miles. As one crosses the Sunshine Skyway traveling north from Sarasota, one enters St. Petersburg which is at the southernmost tip of Pinellas County. The population of St. Petersburg city is 238,647. Approximately 9,000 more people live up at the beach on the Gulf of Mexico. The beach is dotted with large hotels and smaller motels. One of the most famous is the Don Ce Sar, a large pink building that resembles an old Mediterranean castle. Fine restaurants, water sports, boating, theatres, tennis and golf are available to the many tourists who visit here each year. On the east side of St. Petersburg is the Bayfront and Marina. The Million Dollar Pier extends into the water. The Boheme, St. Petersburg's only cruise ship, sails from here. Nearby are museums and the St. Petersburg Yacht Club. Along the waterfront is the Alfred Whitted Airport, the Bayfront Center and the University of South Florida at St. Petersburg. Local hospitals and the business district are located in the downtown area. In contrast to the many expensive condominiums and homes located in St. Petersburg, are less affluent middle class neighborhoods and many poor sections where minority groups live in poverty. Many churches and parks are located in the

area as well as large recreation centers where the old and young alike may gather to meet friends.

To the North of St. Petersburg, as one travels along I-275, is Clearwater. The population of Clearwater City is 89,707. Clearwater is the County Seat of Pinellas. The area is 30.9 square miles (land and water). There are 22.5 square miles of land. The average temperature is 73 degrees F. Clearwater Beach may be reached by crossing over the Memorial Causeway. Many tourists stay in the large hotels and enjoy this beautiful beach every year. Chic shops line the beachfront and there are many fine restaurants to tempt your palate. Expensive condominiums and homes are also located in the surrounding area.

Excursion boats are available to tourists who like to fish or merely explore the coastline from the water. Downtown Clearwater is located across the causeway on the mainland where large office buildings, department stores and the Clearwater Library stand. If one travels east on Gulf-to-Bay, one of the main streets in Clearwater, one will pass some of the neighborhood residential areas, schools and shopping centers. The traveler will cross Highway 19 which leads north to the Greek Fishing Village of Tarpon Springs, and south to the charming island of Tierra Verde. If one continues on Gulf-to-Bay, one will reach the Courtney Campbell Causeway which leads to Tampa and Tampa International Airport. Just before one reaches the causeway, however, one will encounter McMullin Booth Road.

If one turns north on McMullin Booth Road, one will pass Ruth Eckerd Hall and the Kapock Tree Inn and enter the small village of Safety Harbor, where the population is approximately 6,461. On the way to Safety Harbor one will pass middle and upper income residential neighborhoods and newly built condominiums. There is a more rural feeling as one passes small farms, farmstands and horse and dog breeding and boarding facilities. Within this charming country setting there is also some lower income housing.

It is in these three areas that the Family Day Care Homes, which are referred to in the pilot study are located. One of homes is in St. Petersburg, one in Clearwater and the other in Safety Harbor. All of the homes are under the supervision of Latchkey Services for Children, Inc., a central agency which provides child care for infants/toddlers, preschool and school age children. Preschool and school age children are cared for in Day Care Centers, and infants and toddlers are cared for in Family Day Care Homes. The administrative offices of Latchkey, Inc., are located in Largo, Florida, a neighboring community.

> A Family Day Care Home means a facility for child care in a place of residence of a family, person, or persons who receive no more than four children under 17 years of age, away from their own homes, who are not related to such person providing family care and training for such children, for from 2 to 12 hours a day. No more than

three of the four children may be under two years of age. This term shall not be construed to include children above the first grade level, except in homes where children below first grade level are also received for care. (Laws of Florida, Chap. 612681, June 22, 1961, Chap. 70, 893 amended, June 21, 1970 p. 3).

The caregiver in the Family Day Care Home must be 18 years of age and may or may not be a high school graduate. They are required to have a physical examination and a TB test. They must have proof of completion of a Pinellas County Child Abuse and Identification and Reporting Workshop, or its equivalent, on file on site. Other information in the personnel file may include a personnel form, proof of education, references and a current first aid certificate.

The caregivers in the homes referred to in this study are all married women of different ages and ethnic backgrounds with families either school age or grown, who wished to supplement their income by taking care of children of working parents.

The children in the homes referred to in this study are infants and toddlers under three years old. They are of different ethnic backgrounds. Black, White and Oriental children are present in the homes. The homes are located in neighborhoods ranging from low to middle socio-economic status. All the homes have met minimum standards for children's centers and family

day care homes in regard to the physical plant housing family day care homes, nutrition, facility records and license board records as described in the Laws of Florida, to protect the health, safety and mental development of children cared for in the family day care homes in Pinellas County.

Writer's Role, and Responsibilities

The author, an employee of Latchkey Services for Children, Inc., was recently appointed Site Manager III for the Family Day Care Home Network. During the past four years, the author served as a Site Manager I for a Latchkey center, providing before and after school child care for school aged children. The major function and responsibilities in the author's new position are:

Function: To provide overall supervision and management of the total operation of a large network of family day care homes in Pinellas County.

Responsibilities: Serves as liaison between caregivers, network staff, and Latchkey Administration.

Maintains compliance with Federal, State and local licensing standards, grant requirements and agency standards. Reviews, approves and submits all reports as required. Administers agency fee collection process. Screens clients for eligibility.

The author also spent many years in the classroom as a teacher in the public schools of New York State and Florida, and has always been an active member of appropriate professional

associations throughout her career. Related experience includes holding the position of a Camp Counsellor and Drama Specialist in several boarding and day camp facilities in New England and New York State, and the position of Coordinator of Activities and Assistant Camp Director for the Jewish Community Center in St. Petersburg, Florida. While at the Jewish Community Center, the author was instrumental in helping to establish a licensed Nursery School in cooperation with the Pinellas County License Board for Children's Centers and Family Day Care Homes, and has acted as Director of the Nursery School.

CHAPTER II

STUDY OF THE PROBLEM

Problem Statement

Caregivers did not have sufficient training to meet the developmental needs of the children in their homes. They could not leave the site to take advantage of the training workshops offered by local organizations during the day, and had little energy for taking classes at night. Transportation problems also contributed to some caregivers' inability to take advantage of training workshops. Many caregivers could not afford the tuition charged by local colleges for training courses. Caregivers who had no special training lacked the resources to provide age appropriate and developmentally oriented programs for children.

It was proposed that a training specialist visit the home on a regular basis and provide training for the caregiver, assess the cognitive, social, emotional and motor development of the children, and help the caregiver plan a program to meet the needs of the children in the home. Briefly stated then, the problem was that the developmental needs of the children in the home were not being met due to lack of training on the part of the caregiver.

Evidence of Problem

The State of Florida requires three hours of training for caregivers who operate Family Day Care Homes. Latchkey and the Department of Health and Rehabilitative Services require 10 to 20 hours per year, depending upon the educational background

of the caregiver. The Pinellas County License Board for Children's Centers and Family Day Care Homes, sets standards for Family Day Care Homes and monitors the homes twice a year. They sponsor initial orientation programs for new caregivers. Courses are offered during the year in the evenings, on Saturdays and during naptime at the centers under the sponsorship of The Pinellas County Extension Home Economics Department (USF - IFAS); Latchkey Services for Children, Inc.; The Pinellas County License Board for Children's Centers and Family Day Care Homes; and Project Playpen. They do not, however, offer an on-site training program in the home. It is the responsibility of the caregiver to meet the training requirement.

While Latchkey Family Day Care Homes are licensed, they are also monitored by the Latchkey Family Day Care Home Site Manager to be certain that minimal Latchkey standards, as well as License Board standards, are being met. The courses that help Family Day Care Home providers meet their training requirement are offered from January to October. These two hour workshops are held at The Juvenile Welfare Board in St. Petersburg for Down-County providers, and at the Cooperative Extension Service Building in Largo for Up-County providers. Both the workshops and materials provided for caregivers are free. A certificate and continuing education credits are awarded to participants who attend all ten sessions by the University of Florida, IFAS. In the year 1985, the following topics were covered in the training

program: "Family Day Care and the IRS"; "Protecting Children - Preventing Abuse"; "Discipline Techniques - Old and New"; "Good Foods for Young Children"; "Readiness Activities for Young Children"; "Sharing Great Ideas"; "Stimulation Activities for the Diaper Set"; "Communicating with Parents"; "Sometimes it's O.K. for Children to Say No!"; "Being Prepared for Emergencies - What to do in Case of Fire and Storm".

The author discussed the need for an on-site training program, with emphasis on curriculum development for the caregivers in Family Day Care Homes, with a member of the License Board staff at a meeting for Day Care Center Directors at the Juvenile Welfare Board in Clearwater. The staff member agreed that such a program would be a convenient and valuable training opportunity for the caregiver and that there was a need for this type of training in the county. L. Stoller, (personal communication, February 21, 1985).

The author also discussed the need for on-site training of caregivers and curriculum development in Latchkey Family Day Care Homes at the Latchkey Direct Services administration office with the Program/Training Director. She stated that the growth of Family Day Care Homes within the agency has increased dramatically within the past few years. Licensing procedure, recruitment of caregivers and children, placement of children, record keeping and home visits have occupied the staff responsible for managing the homes. While training of caregivers and the development of a curriculum to meet the needs of the children

in the homes is important, there has not been time within the schedules of existing staff to develop these programs. The Program/Training Director acknowledged that these programs were needed and hoped to offer them in the near future. N. Otte (personal communication, August 6, 1985).

Through the cooperation of Jean Cook, Deputy Executive Director of Latchkey Services for Children, Inc., arrangements were made by the Latchkey Family Day Care Home supervisors, for the author to visit three homes they had selected, and to seek the cooperation of the caregivers in taking part in a brief on-site training program which would help them to provide age appropriate activities for the children in their care.

The author met with the three Family Day Care Home providers, referred to in this study, and discussed the need for an on-site training program with them. They all agreed that an on-site training program was well suited to their needs because the training program would be tailored to the home setting and the individual children who were actually in the home. The Family Day Care Home providers also received the exclusive attention of the trainer, rather than having to share her with a group of caregivers. It saved the caregiver the inconvenience of traveling to the Cooperative Extension Service Building, The Juvenile Welfare Board or local colleges to take classes at night or on Saturdays, when she needed to be with her own family in order to take care of their needs.

The Annual Training Program offered at the Cooperative Extension Service Building and The Juvenile Welfard Board is excellent and provides suitable topics for caregivers. They meet from 7:30 - 9:30 p.m., however, and if this is not a convenient time the caregiver is not motivated to attend the classes. Therefore, the caregiver has to find alternative training sessions to meet the training requirement within the year. An on-site training program would provide the training hours needed to meet this requirement.

The 1985 Summary of Training Report, issued by the Support Services Department of the Latchkey Central Agency, reflected the low number of training hours acquired by Family Day Care providers in the Latchkey network. All credentialed caregivers are required to take 10 hours of training per year and non-credentialed personnel 20 hours of training each year. (See Appendix A). It should be noted that in the Family Day Care Network, caregivers 8, 16, and 20 received 6 on-site training credits when they participated in this project. The Child Care Worker training program is the new state training program required of child care personnel, but optional for Family Day Care Home providers.

The need for training became even more apparent when the author visited each of the family day care homes on a monthly basis and assessed the individual training needs of each caregiver and the children in the home. In one home, the caregiver was acquiring English as a second language, and even though she

provided excellent custodial care, the children were not receiving the language stimulation they needed to speak the language of their culture. In another home, the caregiver was not safety conscious when the children were engaged in play activities. During one visit the author observed an infant sitting on a rocking horse, while toddlers took turns throwing a golf ball in the air, dangerously near the infant's head. On another visit, the author observed an infant sitting in a playpen in front of a television set, wailing for a long period of time with no response from the caregiver. The children in this home were observed frequently fighting with one another and playing roughly with an infant. One day, a two year old ran out the front door toward an open gate near the road. When the author expressed concern for the child's safety, the caregiver assured the author that the child had been forbidden to go beyond the open gate. The author wondered what would happen one day if a car was approaching and the child didn't stop at that boundary line.

In the third home the author observed that toys were in short supply, and activities were not planned. While the caregiver was eager to learn how to interact with infants and toddlers, and provide activities for them, she admitted that she didn't know what activities were age appropriate. All of the caregivers seemed to like children and gave the children freedom to come and go within the home.

All of the homes had television sets which the children frequently watched with the caregiver. All of the caregivers had a schedule posted which listed arrival and departure times, naptime, toileting, meal and snack times and indoor and outdoor play periods. Acceptable custodial care was being provided. Good judgment, however, was not always evident. None of the homes had outdoor playground equipment. Playground balls, games, art materials, books, musical instruments, children's records, and a sufficient amount of toys to share were not available in the homes.

The caregivers all agreed to take part in the program and were receptive toward learning how to develop a good program of activities for the children in their care. The children also seemed to enjoy and look forward to the trainer's visits. Six visits were made by the trainer to each home. A list of activities that the trainer, caregiver and the children enjoyed together is provided in Appendix B. The trainer also discussed the developmental needs of infants with the caregivers, and suggested activities that they could provide for the infants. The trainer provided infant and early childhood catalogues to the caregivers to help them become aware of what type of materials were available to them. Suggestions were also made to look for similar toys and materials in the local flea markets where they could purchase them at a considerable saving. The trainer also showed the caregiver how to make simple materials and toys from refrigerator cartons, shoe boxes, egg cartons, coffee cans and other items

around the house that they would normally throw away. A list of these suggestions is provided in Appendix C.

The pilot training program helped to make the caregivers more aware of the difference between custodial and developmental care. They appreciated the on-site training program and expressed an interest in continuing this type of program. When their supervisors visited the homes, they observed that the caregivers were following through and providing planned activities for the children. The pilot program made the caregivers and their supervisors realize that there was a need for a more in-depth and on-going training program in order to provide quality child care in the homes.

When the trainer viewed the program in retrospect, she was pleased with the growth that the caregivers achieved over the six month period. While they initially agreed to take part in the program, they did not know what to expect from the trainer. At first, they watched passively as the trainer conducted activities with the children. Gradually, the trainer encouraged them to participate in the activities. In later sessions, they participated with enthusiasm and asked many questions about how children grow and learn. They were eager to discuss some of the activities they conducted with the children between visits by the trainer. Their expression of regret when the training program ended, was sufficient reward for the trainer and an indication of their interest and enthusiasm for working more effectively with children.

Causes of the Problem

A report issued by the U. S. Census Bureau in 1980 indicated that 45% of mothers who had preschool children were in the work force. In effect, this accounts for 7.5 million infants and toddlers up fourfold in the last three decades. In the recent past, 62% of these children were sent to day care centers, or were cared for by babysitters. Fathers cared for 10%, and 8% accompanied their mothers to work. Today, due to the increase of mothers in the work force, there is an increasing demand for affordable child care services outside the home. (Newsweek, August 9, 1982).

A report issued by the Congress of the United States, (House of Representatives), stated that nearly 60% of mothers who have children ages 3-5, are currently employed. In 1990 it is projected that 12 million children under six will have mothers who work. (Title I, section 102, Child Care Opportunities for Families Act of 1985).

Family Day Care Homes account for 2/3 of all child care in the country. It is estimated that two million women work as Family Day Care providers servicing more than six million children. Apparently only 11 states require training for Family Day Care Home providers. Recent funding reductions in Title XX and the Child Care Food Program has limited training opportunities for Providers of Family Day Care. (Title IV, Section 404, Child Care Opportunities for Families Act of 1985).

The growing need for child care is due to single parents who must work to support their children; an increase in the two-worker family who want a more comfortable life style or must work as a team in order to make ends meet; one or both parents attending school to upgrade their job skills; smaller families and an erosion of the extended family. Today grandparents who were available in the past as babysitters, may either be in the work force themselves or retired and living in another state.

In July, 1984, the NAEYC, concerned over increasing numbers of parents who were seeking child care facilities in their communities for infants, toddlers, preschool and school age children, and children with special needs, approved the following statement:

> The goal of child care regulation should be to assure a level of good quality care while taking into account the different types of settings and the numbers of children served in each. While many people believe that the informal nature of family day care does not warrant such regulation, the National Association for the Education of Young Children supports the regulation of family day care homes in order to ensure the health, safety, and well being of more than 5.3 million of our nation's children. (Young Children, November, 1984, p. 56)

In the state of Florida there are only about 1,500 licensed family day care homes. Most of these homes are located in Pinellas,

Dade and Duval counties. There are 67 counties in the state of Florida. Only nine require licensing of Family Day Care Homes. Registration of Family Day Care Homes is required by Polk County. The following recommendation was made to Secretary Pingree, of Health and Rehabilitative Services, by the Child Day Care Work Group regarding the licensing of Family Day Care Homes on October 1, 1984. "Amend Section 402.312. Florida Statues, to authorize the mandatory licensing of family day care homes." (The Governor's Constituency for Children, October , 1984, p. 19).

Since January 1, 1984, the Department of Health and Rehabilitative Services received 200 reports of child abuse and neglect in day care centers or other child care settings. Each district has taken immediate action to assure reporting of abuse and neglect reports with licensing units. Fifty-eight additional reports of child abuse or neglect in facilities were received between August 30 and September 5. During that period, of the 107 facilities investigated for operation without a license, 16 facilities had entered the licensure process, 75 did not require licensure and 7 facilities were closed or required to reduce the number of children in care. (The Governor's Constituency for Children, October, 1984, p. 15)

Types of child abuse include physical abuse, sexual abuse,

emotional/mental injury and neglect. The number of abused children reported in the state of Florida in 1984, was 137,000 as compared to 86,700 the previous year.

In a recent article in the St. Petersburg Times, entitled "Quality of Day Care Varies Dramatically", the author compared three child care facilities. The cost of care per child in each facility within a few miles of one another is $50.00 per week, yet the quality of care in each facility is strikingly different. During a typical morning at a child care center serving children from lower-income as well as more affluent families, a group of 3 year olds learning about Mexico were busy inspecting a map under the supervision of a young teacher while others were busy making a pinata. Another group of 4 and 5 year olds made tepees laced with yarn while learning about the Plains Indians. Other children were singing, dancing, playing in a sand box and hanging on a jungle gym.

In a home, located in a quiet middle class neighborhood, a caregiver is looking after 12 children ranging in age from 1 to 8 years old. While the caregiver is busy in the kitchen, spreading peanut butter on white bread, the children are playing with toys in a small room at the rear of the house. The 1 year old is crying persistently in a disconsolate wail.

In another home, located in a federally subsidized housing project, the Family Day Care provider is caring for a group that includes two of her grandchildren. In a shabby and sparsely

furnished apartment, a huge television set is tuned to "The Young and the Restless". The children are alternately watching television and chasing one another around the apartment. A large whirring fan stands in the apartment with its protective grille broken. A young child could easily be injured if he tripped while darting by the fan. (Bennets, 1984)

The State of Florida is undergoing a vast change in their training requirements for caregivers. A twenty hour State Child Care Worker's course must be taken by all Child Care Personnel in preschools and school age centers. Additional inservice courses must be taken each year to maintain their professional status. Upon completion of the twenty hour training course, the participant receives a certificate. The training topics offered in three modules include: "Safeguarding Children in Care", "Child Abuse and Neglect" and "Preventing Abuse and Neglect in Child Care".

Ironically, it is stated in the manual issued to caregivers taking Module II, that children under three are more often abused than older children. Yet to date, Family Day Care Home providers, who care for infants and toddlers, are not required to take the twenty hour course offered to other caregivers.

Unless Family Day Care providers are trained in child development, and plan a program of activities that are age appropriate and meet the developmental needs of the children in the home, they are merely providing custodial care. Good custodial care is important and caregivers should be encouraged to provide it.

Unfortunately, poor custodial care is frequently a reality. Safeguarding health and safety, providing good nutrition and maintaining a clean home, are essential to maintaining acceptable child care standards. Developmental deprivation can occur, however, if infants are not stimulated, toddlers not challenged and preschool and school aged children are not given an opportunity to develop physically, cognitively, emotionally and socially in an environment that will encourage learning.

We have to go beyond minimal licensing standards that focus on the physical environment in child care facilities such as checking the number of toilets and square footage of floor space, if we are going to provide quality child care.

> Conscientiously enforced licensing statutes and meaningful voluntary accreditation systems will help prevent future occurrences of abuse, but cannot prevent them all. Professionals in the field have a major role to play in the preventive effort. They need to do everything possible to attract moral and ethical people into child care programs. (Caldwell, 1984, p. 19)

Programs that will help train child care providers to meet the developmental needs of children of all ages, who are in their care, are essential to raise the quality of care in the state of Florida and throughout the nation as well.

Review of the Literature

There are numerous articles, reports and surveys in related literature that deal with the problems in the field of Family Day Care.

An article in Redbook Magazine describes the need for family day care services as critical and offers suggestions to women who want to work and be a full time parent. They can develop a career by providing child care services in their own home. Of course, there are many things to consider if an adult wishes to become a Family Day Care Home Provider. A check list would include licensing or registering, safety, insurance, number of children, equipping and arranging the home, finances, food, establishing procedures, finding children, finding back-up help, starting up a program for children and parents, and solving problems.

A developmental program of activities has to be planned for the children in the home that is age appropriate, as well as field trips and special events. A list of community resources would be helpful to the provider. Time should also be set aside for parents so that the provider can share the joys and the problems faced by the children during the day. (Galinsky, 1982).

Many of the working women today who are in need of child care for infants need guidelines for selecting a good child care facility. In Redbook Magazine there is another article entitled "What you should look for in infant day care". The author suggests

a criteria for measuring the quality of child care centers that may also be applied to Family Day Care Homes. "I am convinced that quality child care is a must and that infants can thrive in a center that meets certain standards" (Brazelton, 1982, p. 56). The standards that he refers to are: That the caregiver is well trained, likes babies, and is aware of individual differences; that the caregiver understands the importance of providing stimulating experiences for the infant; that the caregiver adjust to the sleeping and waking rhythms of the baby. He also suggests a four to one ratio of infants to adults. Dr. Brazelton states that the goal of day care should be to strengthen the family and act as a substitute for an extended family. The center should be a source of nurturing the parents as well as the children. (Brazelton, 1982).

A six month study initiated in St. Paul, MN. conducted by the Child Care Council of Ramsey County, the Ramsey County Human Services Department and Ramsey County Family Day Care Association, was based upon the following assumptions: That parents share in the responsibility with providers and licensing agencies to provide quality care; that parents are not well informed by providers about the standards a home must meet; that parents should share in the evaluation of the homes, that parent evaluation would be useful feedback reinforcing strengths and correcting weaknesses in the operation of the homes.

Approximately 950 Family Day Care Homes in Ramsey provided

care for 3,000 children in 1978. Questionnaires were sent to the parents who were using, or had used, the homes within the past year. On the questionnaires, the parents were asked to evaluate the characteristics of the provider, safety of the facility and the skills of the provider as they related to the developmental needs of the child. Parents were also asked if they would enroll/keep their child in the home and recommend the home to a friend.

The impact of the parent feedback indicated that they were generally satisfied with the care their children were receiving in the Family Day Care Homes. The qualities they rated highly were providers who were dependable, warm and caring; homes that were clean and safe and the degree of personal attention the caregiver gave each child.

Two of the weak points cited were lack of equipment and supplies, and lack of educational experiences. Ninety-two percent of the parents said that they would enroll/keep their child in the home and recommend it to a friend.

> It was demonstrated that parent evaluation was a practical and efficient method of parent involvement in the formal re-licensing process for family day care homes and that it significantly increased the assurance of regulatory compliance and quality care and nurturing in the homes. (M. Winget, W. G. Winget, J. F. Popplewell, 1982, p. 204).

One of the primary sources of child care services in Texas

is Family Day Care Homes. Fifty-seven percent of the 412,500 preschool children are cared for in Family Day Care Homes. The Texas Department of Community Affairs, Early Childhood Development Division and the State Department of Public Welfare's Child Development Program Staff, cooperated to establish the Family Day Care Home System in the state. A Family Day Care Home System consists of several Family Day Care Homes under the auspices of an agency. A Procedures Manual and a training curriculum were developed for the administrative staff. Training of the caregiver helps the agencies maintain a high standard of care in the homes.

In the pre-service training program a lecture and activity format is used, therefore training takes place in more than one location. Some typical locations include the agency office building, a new Family Day Care Home residence, established Family Day Care Home residences and day care centers. Inservice training is scheduled monthly or bi-monthly, during the evening or on Saturdays by the agencies. Transportation and reimbursement are provided by some of the agencies for the caregivers who attend the training sessions. Informal training is provided on-site to the caregivers during regular home visits by agency personnel.

The agencies also provide the caregiver with equipment such as toys, craft materials, fire extinguishers, cribs, cots, crayons, paints, paper, scissors and brushes. These items

are provided either on a permanent or a rotating basis.

One of the incentives for caregivers to operate Family Day Care Homes is the professional training they receive at no extra charge. There are also incentives for the agencies. Family Day Care Homes are easily integrated into the agencies' center-based operations and staff, equipment and facilities can be shared. The rotation of equipment and toys serve large numbers of children. There is an organizational structure which provides for licensing, training and supervision to maintain high quality care in Family Day Care Homes.

Monitoring the Family Day Care Homes, due to the large number of caregivers caring for small numbers of children; and organizing transportation for training are two of the difficulties of operating a Family Day Care Home system faced by an agency.

The caregivers also view traveling to training sessions, nights and weekends, as one of the disadvantages of the system. (Texas State Department of Community Affairs, 1976).

A study was conducted in the Los Angeles County area with the purpose of surveying agencies and individuals who were presently conducting Infant/Toddler development programs, to determine whether the agencies were in the public or private sector, the educational background of the staff, and recommendations for developing staff competency.

There is a growing interest in early intervention programs

for infants and toddlers and significant improvements have occurred in high risk infants when they were placed in a good developmental child care program. Concern has been expressed by experts in the field that some inadequately staffed and hurriedly designed programs may affect infants and parents adversely. "The increasing emphasis in infant development not only for infants with developmental disabilities but for all infants, stresses the need to address the problem of providing personnel with the expertise to staff and conduct these rapidly expanding programs." (Gorelick, 1978, p. 3)

The respondents were all associated with child care agencies or adult education schools with parent/child programs. The staff positions held by the respondents included administrators, directors, coordinators, teachers, teaching assistants, staff positions in related fields and colleges and universities.

The respondents' recommendations for the preparation and competencies needed to enter the field were as follows:

4 year college degree - 35%

Graduate degree - 43%

A. A. Degree - 13%

Other - 9%

The respondents that filled in "other" suggested that the caregiver be a "loving person", "caring person", "affectionate" and "aware of family reactive process." Seventy-five per cent agreed that a credential should be required. The list of competencies felt to be essential by the respondents were:

-understands physical development

-understands psychological/emotional development

-knowledgeable about disabilities

-nurturing of others

In selecting appropriate academic majors, 37% of the respondents chose "Infant Specialist" for normal infants; 26% chose "Child Development" and 26% chose "Infant Specialist" for toddlers. In the exceptional child category an "Interdisciplinary Team" was recommended by 39% of the respondents for infants and 43% for toddlers.

The Interdisciplinary Team was composed of the disciplines of Child Development, Physical Therapy, Psychology, Social Work, Occupational Therapy and Pediatrics.

The summary of the study contained the following statement:

> Our country's greatest resource is its children. Yet, programs for young children are continually established with little or no monitoring of the preparation of personnel. It is hoped that the same concern shown toward setting standards for the physical facilities which house young children will be displayed in establishing guidelines for the preparation of individuals to staff these emerging programs. (Gorelick, 1978, p. 9).

Another study, funded by the city of Casper and sponsored by Nutrition and Child Development, Inc., in Cooper, Wyoming, comprises a series of goals, recommendations and methods to

improve the quality of care in Family Day Care Homes. Some of these goals are:

-to improve the self image of the provider

-to assure the well-being of children by training providers

-to improve productivity by assessing quality care for children

-to encourage professionalism by developing a career ladder for Family Day Care providers

In order to achieve these goals it is suggested that a training program for caregivers should be offered so that they will understand what constitutes good day care. Providers should also be encouraged to assess their own programs and develop and support programs that will evaluate the providers performance. Providers should be offered community resources made available through a resource center.

The Study recommends that the State Department of Public Assistance and Social Services continues to be the certifying authority, revising and updating day care standards as needed, and be responsible for enforcing uniformity in administration of day care regulations throughout the state. Further, the State Department of Public Assistance and Social Services should assure adequate funding to the local Department of Public Assistance and Social Services to provide

> for the manpower needed to certify family day care and to provide training. (Majeed, 1983, p. 18).

Members of the Family Day Care Providers Association in south Snohomish County approached Edmond's Community College and requested help in acquiring the CDA credential. A cooperative center was established in which Family Day Care providers would be assessed and receive training. It was the recognition of the CDA credential by the Washington Department of Social and Health Services that inspired this group to apply for the credential. There are three aspects to the training program. The trainees are involved in a laboratory setting one day each week, along with the children in their care. They take responsibility for managing the cooperative, assisting in curriculum development and hiring an assistant to interact with the children. They receive three Family Life Education credits each quarter. With the help of volunteers they develop personal portfolios. Upon completion of the program they are awarded the CDA credential.

> During the time the grant was funded a weekly evening class was scheduled to assist CDA candidates in preparation of their personal portfolios. This was a 2 credit class taught by an Early Childhood Education Instructor. When funding was discontinued, providers who had already received their CDA credentials volunteered to advise in the preparation of portfolios. This commitment to continue, despite loss of state training funds, is evidence of the quest for professionalism

on the part of the providers. (Taylor, 1984, p. 8).

The CDA credential is recognized as equivalent to 45 credits in the academic field of Child Development. These 45 credits are awarded to CDA's by the Early Childhood Education Department of Edmonds Community College.

A book entitled Family Day Care Resources & Providers covers many issues identified by child care providers as important to their professional needs. These issues are: Registration and licensing, nutrition, safety, home learning environment, learning activities, reactions with parents and community resources.

The book provides many helpful suggestions for meeting their needs. There are sections devoted to recipes and children's menus, field trips, suggested learning experiences, community resources, educational resources, safety procedures, identifying and reporting child abuse, meeting parents, age appropriate activities for infants, preschool and school age children, discipline techniques, illness, daily schedules and sensitive issues such as toilet training, sex-related questions, death, birth, divorce and separation, marriage and religion. It also discusses how to deal with some of the frustrations caregivers feel during the day and makes suggestions for developing support groups for providers in the community. (Squibb, Betsy, 1976).

An independent study course offered through Wisconsin University, Madison University extension, to caregivers who

want to acquire the knowledge and skills needed to become certified as Family Day Care providers is used in association with a family day care handbook. The units included are:

Unit I - Licensing, registration, certification, training

Unit II - Child development

Unit III - Health and Safety

Unit IV - Nutrition

Unit V - History of Family Day Care

Unit VI - Management and record keeping

Despite the growth in day care centers the most widely used kind of child care is Family Day Care Homes. There are six million children under six whose parents are employed and only about one million places in day care centers. The rest of the children are cared for by individuals either in the client's home or in the caregiver's home. (Adams, 1978, p. 7).

The author cites the option of being employed at home, enjoying the creativity of children and offering a service to the community as some of the reasons providers operate Family Day Care Homes. Some pertinent questions raised by providers in relation to the training and preparation needed to offer quality child care in the home are:

-How much preparation is needed?

-Wouldn't we become like the Child Development Centers if we put too much emphasis on training?

-Do parents want Family Day Care providers to be the Early Childhood Education teachers?

Parents choose Family Day Care Homes for the following reasons:

1. There are a small number of children in the home.
2. The home is conveniently located.
3. The cost of care is lower than it would be at a child care center.
4. It is often the only choice for infants and toddlers under three.

The author cites some of the differences between the providers who offer custodial care and the providers who offer developmental care.

Custodial Care	Developmental Care
views favorite TV programs during the day	uses TV to occasionally show quality children's programs
performs household chores while the children play	plans household chores around napping time or when children are not in the home
talks with friends on the phone for long periods of time	uses the telephone as a resource or in an emergency
shows little interest in interacting with the children	shows interest in frequent interaction with the children
lacks planning for the children's daily activities	plans daily for periods of rest, playing, eating and learning

The author describes the ideal caregiver as a surrogate mother who should provide the necessary stimulation to foster the growth and development of each child, be alert to mood changes, and through daily observation catches learning disabilities, health

and emotional problems in the early stages of development. (Adams, 1978).

A report that described a Community-Based Day Care Home Training and Support System in Kansas involved the communities of Hutchinson, Overland Park and Wichita located in the three counties of Reno, Johnson and Sedgwick.

> The evaluation report is based upon the response of family day care trainees in each of the three counties who participated in this demonstration project during 1978-1979. The demonstration project was founded on the premise that locally organized training and support services would be beneficial to the development of child care skills and attitudes and lead to an increase in the number of certified Family Day Care Homes available to WIN clients. (Poresky, 1979, p. 1).

The Department of Social and Rehabilitation Services, in cooperation with a local child care association or center, was the coordinating agency in the communities.

In order to determine the value of the community-based training program, the trainees were asked to rate the training they received. In general they felt that due to their participation in the training sessions, the quality of child care would improve in their homes. The trainees felt that the trainer was well prepared for the training sessions and was knowledgeable about their needs. The trainees in the three communities differed on which part of the training was most helpful to them. In

Johnson County the trainees rated group training sessions most helpful. In Reno County 11% of the trainees felt that individual home visits were most helpful while 89% were in favor of group training sessions. In Sedgwick County 40% favored individual home visits, 30% favored group training sessions, and 30% favored a combination of group training sessions and individual home visits. The trainees differed on their rating of the first edition of Caring for Children Today. Sedgwick County trainees gave it a rating of 3.3 out of a 4.0. The trainees from Reno and Johnson County rated it 3.9 on the 4.0 scale.

The sections of Caring for Children Today rated most helpful to the 38 trainees were:

Getting Prepared & Organized (23 votes)

Discipline and Guidance (22 votes)

Helping Children Grow & Learn (16 votes)

Understanding Children (16 votes)

Child Abuse & Neglect (13 votes) (Poresky, 1979, p. 8).

Approximately 10-11 hours of group training was given in each county. Individual consultation varied from county to county with Reno reporting an average of 2.2 hours, Sedgwick 4.0 hours and Johnson 5.8 hours.

"Incomplete data precludes a comparison of the number of initial child care "slots" and those available after training". (Poresky, 1979, p. 27).

The child care providers gave the training program a positive evaluation. (Poresky, 1979).

In the metropolitan area of Seattle, Washington, approximately 14,000 children under six years have working mothers who depend on Family Day Care Homes to provide child care.

> Seattle Day Nursery - a United Way Agency - has tackled this problem by bringing training, literally, to the doors of day care providers. Since 1976, through the agency's Early Education Mobile Resource Program, vans piloted by education specialists have been visiting caregivers in the city and surrounding suburban and rural areas; providing specialized training and support services to enhance caregiver skills. (Mauk, Gogerty, 1982, p. 7).

They have expanded from 1 van in the inner city to 3 vans in 3 counties servicing 350 homes and centers, with a plan to add 85 homes and 9 centers each year. The trainers provide the caregivers with educational materials such as movies and art supplies. A mobile van assistant supervises the children while the caregiver spends an hour and fifteen minutes twice a month with a resource specialist. The mobility of the van overcomes the isolation of the caregiver particularly where transportation problems exist. It makes training available at her doorstep.

The children in the homes look forward to the van's coming because they love to participate in the activities the assistant provides. The caregiver appreciates the emotional support and advice given to her by the trainer. (Mauk, Gogerty, 1982).

A paper presented at the annual meeting of the National Council on Relations in Milwaukee, Wisconsin, on October 16, 1981, addressed the issue of legislative oversight on Family Day Care Home policy. A state day care policy did not exist in Connecticut where the study was designed. The need for day care in the state was escalating, due to the number of parents who were employed outside the home. Competent day care services strengthened the family and allowed the parents to pursue their careers, while providing child care for their children.

> The National Child Care Consumer Study in 1975 based on a national probability sample of more than 4,000 households with at least one child under 14 estimated that 37% of the children receive child care out of the home, versus 45% who receive family or relative care and only 16% who receive center-based care. (Anderson, 1981, p. 6).

Family Day Care Homes are frequently selected as a day care service because the home is usually in the consumer's neighborhood; it's less formal and service is more personalized; the hours are more flexible and there are smaller numbers of children receiving the attention of the caregiver.

The population for the study consisted of all licensed Family Day Care Home providers in the state of Connecticut during February, 1980. In-depth questionnaires focusing on the history of care, licensure, training and technical assistance, the children served, and the providers themselves, contributed to the data

collected. A larger survey was conducted involving local district offices, the main state department of day care services and the state day care council, which was also part of this project. The results of the survey highlighted the fact that many family day care providers felt that there was an advantage to being licensed. The advantages included receiving workshop training, information on issues of health, safety, program planning and activities. About 40% of the providers expressed an interest in becoming part of an Association of Family Day Care Providers. Approximately 53% felt that having trained people supervise their performance was important, and 44% said that help with filling the vacancies in the home had been important. (Anderson, 1981).

In another paper presented at the conference on Child Care Education, at the University of Miami in November, 1981, child care viewed as a profession is discussed with emphasis on decreased federal spending and decentralization of government services. It is noted that the public still does not differentiate between child care in the home and child care in a professional setting. Nor does the public acknowledge that the Child Care Professional has special knowledge and skills that the babysitter in the home does not posess. "Professionalism of day care services is advocated as the means of best coping not only with the current federal suspicion of day care but also with the unsatisfactory working conditions experienced by day care workers." (Porter, 1981, Abstract).

The qualifications and personal characteristics of the caregiver are also discussed. The ideal caregiver is described as warm, mature, emotionally stable, patient and responsible. Her knowledge base should include the areas of health, safety and nutrition. She should communicate with parents and children effectively, use appropriate discipline procedures, set realistic behavior standards, and provide a comfortable home for the children where they can live and learn. (Porter, 1981).

Summary of Literature Review

The following major issues were identified in the literature review. They included:

1) Starting up a New Family Day Care Home
2) Licensing, Regulation and Evaluation of Family Day Care Homes
3) Choosing a Good Family Day Care Home
4) Personal Characteristics and Educational Backgrounds of Caregivers
5) Developmental Child Care as Opposed to Custodial Care
6) Training of Caregivers
7) Curriculum Development for Children in Family Day Care Homes
8) Development of Community Resource Centers
9) Development of Professionalism
10) Federal, State and Local Government Responsibility in Day Care

The review of the literature highlighted suggestions for resolving some of these issues. For example, Galinsky (1982), outlines the steps a full-time mother would take if she were interested in setting up a Family Day Care Home. These steps include: Licensing, safety, insurance, number and ages of children, equipping and arranging the home, finances, food, finding children, finding back-up help, and establishing procedures.

Brazelton (1982), suggests that a parent look for a center that offers high standards of quality child care and are supportive to parents who often feel guilt at leaving their child. The goal of a good center or home is to provide for the parents as well as the child.

Mauk and Gogerty (1982), describe a door to door training program that emphasizes child development, curriculum planning, center management, activities with children, child abuse, sex education and discipline.

Winget, Winget and Popplewell (1982), feel that parents should share in the responsibility with providers and licensing agencies to provide quality care, and share in the evaluation of the homes.

The Texas State Department of Community Affairs, Austin, office of Early Childhood Development (1976), provided a Procedures Manual and a Training Curriculum for the Administrative staff. They offered both pre-service and in-service training programs

to caregivers because they believed that training of the caregiver helps the agencies maintain a high standard of care in the homes.

Gorelick (1978), conducted a study in the Los Angeles area to determine whether agencies and individuals who were presently conducting Infant/Toddler Development Programs were in the public or private sector, the educational background of the staff and recommendations for developing staff competency.

Another study by Majeed (1983), conducted in Casper, Wyoming, offers a series of recommendations, goals and methods to improve the quality of child care in Family Day Care Homes.

Taylor (1984), discusses the Child Development (CDA) Program at Edmonds Community College, for Family Day Care Providers, provides an exploration of the CDA credential and reviews the steps required to obtain the CDA.

Squibb (1976), in a book entitled Family Day Care Resources and Providers, covers many issues important to the provider's professional needs. There are sections in the book devoted to menus, field trips, educational resources, safety procedures, identifying and reporting abuse, meeting parents, age appropriate activities for infants, preschool and school age children and many others.

A report by Poresky (1979), that described a community-based day care home training and support system in Kansas was based on the premise that locally organized training and support services would be beneficial to the development of child care skills and attitudes, and lead to an increase in the number of certified

Family Day Care Homes available to WIN clients.

Mauk and Gogerty (1982), describe a program called "Workshop on Wheels" conducted in the metropolitan area of Seattle, Washington. The trainers travel by van to the different Family Day Care Homes and provide training, resource materials, educational supplies, and generally act as a support system to the caregivers.

Adams (1978), who is associated with Wisconsin University, Madison University Extension, developed an independent study course for caregivers who want to acquire knowledge and skills needed to become certified as Family Day Care Providers. The study guide is divided into six units which cover areas of Licensing, Regulation and Certification, Child Development, Health and Safety, Nutrition, History of Family Day Care, and Management and Record Keeping.

Anderson (1981), in a paper presented at the annual meeting of the National Council on Relations in Milwaukee, Wisconsin, described the need for day care in the State as escalating, due to the number of parents in the work force. He stated that competent day care services strengthened the family and released the adults to pursue their careers while providing child care for their children. He noted that a State day care policy did not exist in Connecticut where the study was designed. The results of a survey conducted as part of this study, discuss some of the advantages of Family Day Care Home Licensing to the caregivers.

Porter (1981), in a paper presented at the Conference on Child Care Education, at the University of Miami, discussed

professionalism in the field of child care and related it to decreased federal spending and decentralization of government services. She stated that the public does not acknowledge that the Child Care Professional has special knowledge and skills that a babysitter does not posess. She views professionalism in day care as a means of coping with the current federal suspicion of day care and changing the image the community has of the caregiver.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Goals and Expectations

The goal for this practicum was to create a good child development program in family day care homes implemented by a knowledgeable caregiver and planned with a specialist in order to meet the needs of the individual children in the home.

The objectives were:

To develop a pilot project involving three family day care homes in Pinellas county in Florida.

To assist the caregiver in meeting the annual training requirement.

To design and implement a Caregiver's Training Program on site.

To help the caregiver plan and implement activities that would meet the developmental needs of the children in the home.

To establish on-site training programs in all the Latchkey Family Day Care Homes in Pinellas County.

To develop a system of evaluation to measure the effectiveness of the training program.

In Chapter II, the author stated that she visited three Family Day Care Homes six times each, during the pre-implementation phase of the proposal, for the purpose of assessing, through observation, the training needs of Family Day Care Home providers.

The three caregivers appreciated the support and training they received. The training centered around activities because scheduling the day and including age appropriate activities seemed to be their greatest need. A daily schedule was developed. (Appendix D). The training needs quickly identified in the pre-implementation phase of this project included training in Child Development, Health and Safety, Relating to Children and Parents, Nutrition, Time Management, Using Community Resources, Setting Realistic Behavior Goals for Children and Discipline Techniques. A training program centering on these needs was designed and scheduled for all Latchkey caregivers in the implementation phase of this project. (Appendix E).

Behavior Expected

The following behavior is expected from the caregivers as the result of the on-site training program:

- sets realistic behavior standards for the children in their care.
- recognizes the characteristics of a healthy child, symptoms of illness and communicable disease.
- prepares nutritious meals for the children in their care.
- provides age-appropriate developmental activities that would help a child to learn.
- follows a daily schedule during the day that would include time for activities, toileting, nap and meals.
- keeps accurate records on file.
- maintains licensing and agency standards.

Caregivers are expected to attend two Inservice Days each year as part of their contract with Latchkey. Maintaining standards of professionalism are important in the home. Business hours are conducted between 7:30 a.m. and 5:30 p.m. Caregivers should be prepared to receive children when they arrive and greet the parent. They should follow the daily schedule as closely as possible and familiarize parents with the schedule. Both the custodial and developmental needs of the child should be met during the day. When the child is picked up, the caregiver should be prepared to share the events of the day with the parent in an unhurried manner; and be attentive to the parent's comments and concerns.

If a caregiver cannot provide service on a day other than a holiday, she should provide a substitute caregiver who will remain in the licensed home to care for the children in her absence. She may refuse service to children who have a contagious disease or who are seriously ill. She is responsible for providing a warm and safe environment for the children in her care.

Mechanism for Recording Unexpected Events

A significant event that occurred during this practicum was the appointment of the author to the position of Site Manager for the Latchkey Family Day Care Homes in Pinellas County. When the author began this practicum she was a Site Manager for a school age center at High Point Elementary School in Clearwater. The author had to request permission of the Deputy

Executive Director to visit three family day care homes and conduct this project through the cooperation of the caregivers and their supervisors. Now the responsibility of training the caregivers and developing a training program is part of the author's job description. There is a centrally located Family Day Care Home office in St. Petersburg, and a field office in south St. Petersburg. A full time assistant is located in the field office while the Site Manager and a full time secretary are located in the mid-county office. Both the Site Manager and her assistant were involved in the implementation of the training program.

Evaluation Instruments

The pilot program was completed in the pre-implementation phase of the practicum and served as an introduction to the on-site training program for the caregivers. Each caregiver had an individual training summary on file approved by the training department of the Central Agency. Each time a caregiver received training, a training slip, in duplicate, was filled out by the trainer documenting that the training took place. The slips were sent to the Training Department of the Latchkey Central Agency to be stamped and recorded. A copy was sent to the caregiver for her records. (Appendix F). At the completion of the pilot program a computer print-out, prepared by the Central Agency Training Department, recorded the number of additional training hours received by the caregivers who took part in the on-site pilot program. Each caregiver received six hours of training

towards completing the yearly requirement.

Since the on-site training program was well received by the caregivers, it was decided by the Family Day Care Home Site Manager and the Program/Training Director of Latchkey's Direct Service Division, to implement an on-site training program for all the caregivers in the network. A program was developed by the Site Manager and implemented by the Site Manager and Assistant Site Manager. Every Family Day Care provider received two visits a month by one of the trainers. Each visit was one hour in length. During the first half hour the trainer monitored the home to be certain that licensing standards were being maintained. The initial monitoring was followed by a half hour training session. An evaluation form was developed by the Site Manager and approved by the Deputy Executive Director of Latchkey's Direct Service Division. The form was designed to record progress in record keeping, safety procedures and program development. Each item on the form was marked either in or out of compliance when the trainer monitored the home. (Appendix G). The form serves as a history of each caregiver's progress as a Family Day Care provider.

The Family Day Care Homes were monitored by the Operations Director of the Direct Service Division of the agency during on-site visits. A follow-up meeting between the Operations Director and the Site Manager was scheduled to discuss areas of non-compliance. A corrective action plan was instituted and a period of time specified to correct the areas of non-compliance in the homes. (Appendix H).

In February of 1986, a quality assessment was conducted by the Contracts Manager of the Latchkey Central Agency. Operational systems, record keeping and program were evaluated and an overall rating of 98% was achieved by the Family Day Care Home Network. Two on-site visits were made to Family Day Care Homes. The homes were rated 95% and 96% respectively, for meeting the quality standards required by the agency. (Appendix I).

The training program and suggested activities were pre-screened by the Program/Training Director of the Direct Service Division of the agency, and approved for implementation. On-site visits to evaluate the program and a follow-up conference between the Site Manager and Program/Training Director was scheduled following the visits to the homes.

The effectiveness of the on-site training will be measured through participation in the career ladder program. Caregivers who qualify for commendable status will have to take a written and oral examination to show that they have a basic knowledge of child care principles. The caregivers will also have to show that they have upgraded their equipment and have made a sincere effort to enhance their professional status by taking advantage of a variety of educational opportunities available to professionals in the field. (Appendix J). The evaluation of the caregivers for commendable status began in February, 1986. It is hoped that most of them will achieve this status by July 1, 1986. Caregivers who qualify for commendable status will receive financial compensation.

A schedule was developed for staff members who are conducting the training program and approved by the Operations Director of Latchkey's Direct Service Division. Each caregiver has been scheduled for training twice a month. (Appendix K). Each time a training session is held, a training slip documenting the training is sent to the Central Agency Training Department. A copy is given to the caregiver. All the caregivers had to complete 10 or 20 hours of training based on the educational requirement by December 31, 1985. A computer print-out, prepared by the Training Department, shows the gain in training hours accumulated by the caregivers, since August 26, 1985, due to the on-site training program and attendance on Inservice Day. (Appendix L). All but one of the caregivers completed their training requirement. The caregiver who did not complete the training had taken a leave of absence in the fall and was not available to be trained.

Changes occurred in the evaluation process as stated in the proposal and outlined in the report. The Family Day Care Home Network is under the supervision of Latchkey's Direct Service Division which has set up evaluation procedures for monitoring of staff performance, operational procedures and program development and implementation. All of the Family Day Care Homes are licensed. Therefore, evaluation procedures have to be compatible with the license board standards for evaluating the quality of the home. The Department of Health and Rehabilitative Services monitors the use of Title XX funds. All of the clients who are served by the caregivers are subsidized through this program. Therefore,

HRS standards must be taken into consideration when employing evaluation techniques. The evaluation form, as shown in Appendix G, meets all of the evaluation requirements as outlined by the agencies cited above. This form was developed by the Site Manager of Latchkey Family Day Care Homes.

CHAPTER IV

SOLUTION STRATEGY

Discussion and Evaluation of Possible Solutions

An on-site training program was developed in Seattle, Washington, called "Workshop on Wheels". A van containing a Resource Specialist and a Mobile Van Assistant visit the caregiver twice a month. The mobile van assistant relieves the caregiver so that she may receive training from the specialist. Training takes place in the van.

> The program for family day care providers follows a 20 session curriculum. Each 75 minute session includes four elements: Discussion of the caregiver's concerns and a topic of the day presented by the trainer (the time spent for each segment varies, depending on the caregiver's needs); discussion of a specific activity (5-10 minutes); selection from the van's toys and resource materials for use in the day care home (15 minutes); and modeling of skills by the specialist (10 minutes). (Mauk & Gogerty, 1982, p. 8).

While there is a suggested curriculum, the sessions in the van are planned for individual discussion because each caregiver's needs, ages of the children in her care, type of home, and the caregiver's skills are different.

Basically this on-site training program is similar to the program the author had in mind for the Latchkey Family Day Care Providers. The program meets the individual needs of

the caregiver and the children in her care. The revolving toy lending library and resource materials are also necessary to help the caregiver provide quality care. The cost of a van, however, is prohibitive. Staffing and equiping the van would also raise the operating cost of this type of training plan, not making it feasible for us to adapt at this time.

There are certain aspects of the Early Education Mobile Resource Program which were adapted to the Latchkey setting. The Site Manager or the Assistant Site Manager visited the home in order to make certain that the caregiver was maintaining her home according to the standards that Latchkey and The Pinellas County License Board have set for Family Day Care Homes. The visit was one hour in length. A half hour was devoted to the training of the caregiver. The trainer acted as a role model for the caregiver while conducting age appropriate activities with the children. There are thirty-one caregivers in the Latchkey Network for Family Day Care Providers in Pinellas County. There are two monitors available to train the caregivers. Each monitor visits homes according to schedule, allowing for two visits per caregiver each month. The monitors are providing 12 hours of on-site training a year. The two inservice days, sponsored by Latchkey, provide additional training opportunities for the caregivers. All the training hours are credited toward the training requirements for Family Day Care Home Providers.

The Pinellas County License Board operates a revolving

toy lending library. Many of the caregivers have not taken advantage of this opportunity. The trainers strongly encouraged them to do so because many of the homes do not have a sufficient variety of age appropriate toys.

The concept of day care service as a profession (Porter, 1981), emphasized the need for training of caregivers to distinguish them from untrained babysitters. Some of the areas of competency mentioned by Carol Porter closely allign the areas of competency included in the training program developed by the author. These common areas included hygiene, safety and nutrition, setting realistic behavior standards, appropriate discipline techniques and effective communication with parents and children.

Developing professionalism in day care through the training of providers was one of the goals in the Casper Family Day Care Study (Majeed, 1983). It is only through improving the provider's self-image that one will improve the quality of day care. A monthly newsletter is sent to all the Latchkey caregivers with the emphasis on increasing professionalism in the home. (Appendix M). Majeed also advocates strong community support systems for the providers.

Another method of providing training for caregivers is through an independent study course.

> This study guide, used in association with the Family Day Care Handbook (1974), provides an independant study course for babysitters and others who want to acquire the knowledge and skills needed to become certified as family day care providers. Each of the six units in the guide

consists of introductory reading material, assigned reading in the text, study notes, self-test questions and a written assignment. (Adams, 1978, Abstract).

Diane Adams focuses on the importance of child growth and development and differentiates between developmental and custodial care. The Family Day Care Home Site Manager strongly agrees that developmental care is important and provided a slide show and discussion in this study area in one of the workshops scheduled during the Inservice Training Program in November. Good custodial care, however, is not to be minimized and a balance of both good custodial and good developmental care is to be desired.

A Home Based Information Packet (Elgas, 1981) provides resources and basic information for program development for anyone interested in home-based programs. It also describes the relationship of the CDA credential to home-based programs. CDA training is described as unique because it is individualized and competency based. At least half of the training time is spent in the field. These field experiences are integrated with academic work. The training schedule is flexible and some college credit is earned.

In south Snohomish County, Washington, an organization of Family Day Care Providers approached Edmonds Community College and urged support for a system of credentialing providers.

Family Day Care Providers generally work long hours, often receiving children in the early hours of the morning as the parent begins a long commute to work, and returning children to the parent nine or ten hours later. Fatigue

> and the need for personal or family time make regular attendance at formal classes a formidable obstacle for providers. With this in mind, the training delivery at Edmonds Community College was planned to occur in the daytime hours and to include children in the care of providers. (Taylor, 1984, p. 7).

The providers participated in a weekly laboratory assignment. They shared responsibility for the business management of the cooperative and hired an instructor to assist in the development of a curriculum for the children in their care. The college provided an instructor to serve as a resource person and to monitor standards. The providers who participate in this program earn 3 Family Life credits each quarter. Providers wishing to earn the CDA credential were given a feedback through an Early Childhood Instructor who observed them in class. A weekly evening class was scheduled to assist CDA candidates in the preparation of their portfolios. An incidental advantage of this training program is the development of a career ladder for providers through offering them college credit in Child Development Studies.

Latchkey is also encouraging their Family Day Care Home providers to develop a career ladder through increased competency in the areas of Education, Experience, Training, Environment, Equipment and Supplies and Program and Scheduling. A monetary incentive is offered to caregivers who exceed the minimum standards in these areas. The Child Development Accreditation Program has been described as partially field-based. The training program

for the Latchkey Family Day Care Home providers, with the exception of the two Inservice Days, is entirely home-based. The training takes place in the home with the caregiver and is designed to meet her individual needs and the needs of the children in her care.

A community-based Family Day Care Home Provider training program was conducted in three Kansas communities. The trainees agreed that the program was well organized and that the content met their needs. "The trainees positive evaluation of the training is reflected in the significant gain in their post-test satisfaction scores pertaining to training and supported by gains on the Day Care Self-Assessment Instrument". (Poresky, 1978, p. 19).

The trainees were asked to respond to pre-training and post-training questionnaires. The questionnaires included information pertaining to the backgrounds of the providers, day care self-assessment, satisfaction, attitude, and training. The training evaluation form completed by the caregivers included questions pertaining to the competence, experience and background of the trainer; how well the trainer understood their needs and the information they received met their needs. They were also asked what part of the training was most helpful to them. Their answers varied significantly among communities. Some communities felt more positive about individual home visits while others favored group training. Some of the training areas covered in the program were preparation and organization, understanding children, health and safety, nutrition, discipline and guidance, child abuse and

neglect and working with parents. (Poresky, 1978).

All of these topics were included in the Latchkey Family Day Care Training Program. A combination of home visits, on-site training and group training provided on Inservice Day was planned and implemented as part of the program.

Due to the growing interest in infant and toddler programs and the concern of many experts in the field over the qualifications of the staff who are conducting these programs, Molly Gorelick, (1978) prepared and distributed a survey to 186 agencies in the Los Angeles area who were listed in the Infant Program Directory. The results of the survey indicated that 78% of the respondants were in favor of a 4 year or graduate degree for those entering the field; 13% suggested a 2 year degree and 9% suggested other important factors other than a formal education that should be taken into consideration. Loving, caring and affectionate persons were included in the "other" category. Competencies included knowledge of the physical, psychological and emotional development of children, as well as disabilities. It was also considered essential that the person be nurturing of others.

While the advocation of such high standards for personnel working with infants is commendable, the reality is that the majority of providers in Family Day Care Homes are high school graduates with little or no training in child care, or high school dropouts. Therefore, training in the field of Child Development is essential for providers operating Family Day Care Homes. It is essential for the well-being of the children in their care. The Latchkey

Family Day Care Site Manager recognizes this need and places a high priority on the training of the caregivers, and selecting of applicants with the personal qualities described in the "other" category.

A resource for providers that would appear to be very helpful to caregivers, is a book by Betsy Squibb (1976) which includes information and suggestions in the areas of nutrition, safety, learning activities, community resources and relations with parents. Caregivers were encouraged to visit their local library and select appropriate literature in the field of child care to supplement their training program.

Relations with parents has been mentioned in several of the sources used as references in this practicum. In a study by Winget, et al., (1978) it is suggested that parents be included in evaluating Family Day Care Homes. Sometimes parents assume because a home is licensed, that they do not need to be concerned about the quality of care. Licensing, in many states, simply enforces certain regulations that pertain to the physical environment in which the child resides. Quality of care and nurturing vary from home to home. It is the responsibility of the parent, in cooperation with the providers and licensing agencies, to participate in maintaining standards of quality care.

The Latchkey Family Day Care Home Site Manager involved the parents who placed children in the Latchkey Family Day Care Homes, by asking them to respond to a Satisfaction Survey in January of 1986. When the survey was returned, the results

were helpful to the Site Manager and Assistant Site Manager in their monitoring and evaluation process. (Appendix N).

Description and Justification for Solution Selected

The problem of improving the quality of care in the Latchkey Family Day Care Homes was approached in many different ways. The homes are licensed through The Pinellas County Board of Licensing for Child Care Centers and Family Day Care Homes. Therefore, there is regulation of the physical environment. The Family Day Care Home Providers participate in a U.S.D.A. Food Program. Nutritional guidelines are provided and a monitor visits the homes to make certain that standards are maintained. A licensing specialist and a nutritionist/coordinator were invited to speak at the Inservice Day Program for caregivers in November. Expectations for quality child care were made clear to the caregivers by both specialists who were cooperating with Latchkey in an effort to improve Latchkey Family Day Care Homes.

There are many incidents of child abuse and neglect that occur in family day care homes through the ignorance of the caregiver. While these forms of abuse and neglect may be unintentional, they are still injurious to the child. Permitting older children to hit, push or shove younger children, allowing children to fight without adult interference, permitting name calling and other forms of verbal taunting, leaving crying infants unattended, runny noses unwiped, and soiled diapers unchanged for long periods of time, are examples of neglect. Spanking children, leaving them in a crib or playpen for an inappropriate length

of time, screaming and yelling at children, depriving them of the use of the potty or refusing to feed them because they are bad, are some forms of abuse. A good training program prepares caregivers to identify and recognize forms of child abuse and neglect. We would like to eliminate all similar incidents of abuse and neglect in the family day care homes.

Through training in Child Development, the caregiver learns that a child's development progresses in stages and is able to help the child through one stage and into the next. The caregiver provides age appropriate activities that help the child to learn. A knowledge of child development helps the caregiver to recognize inconsistent or inappropriate behavior which may indicate a possible abuse or neglect situation.

> A basic knowledge of child development will also insure that you, as a qualified child care provider, would not abuse or neglect a child out of ignorance. And too, if you understand child development as a process of growth and change, your program activities will reflect this understanding. A better child care program then, will be one that takes into consideration the essential developmental differences in children. (Johnson, Thompson and Adkins, 1985, p. 18).

A training program in Health and Safety helps the caregiver to recognize the characteristics of a healthy child, symptoms of illness, and communicable diseases. Daily health checks, emphasizing positive health practices, providing nutritionally balanced meals and snacks, following sanitary practices in care

and feeding, safeguarding children from environmental hazards, practicing fire drills and providing first aid in the event of accident or illness, helps child care workers to provide for the children's health and safety on a daily basis.

Nutrition education is very important for the caregiver and the child. Children should learn early to make correct food choices, develop positive attitudes toward food and learn to accept and enjoy a variety of foods that are nutritious. Many daily activities can be centered around food and help the child to identify, taste and enjoy new eating experiences while socializing with his peers.

Using community resources such as libraries, parks, zoos, and many others can provide opportunities for field trips and broaden the environment in which the child learns. Some homes are within walking distance of facilities that provide special programs and events for children. Taking the children to a nearby MacDonalds can provide an interesting eating experience for them as well as a special treat.

Training in setting realistic behavior goals for children helps to eliminate unreal expectations on the part of the caregiver. Clear and appropriate limits should be set, reasons for rules should be explained, and children's rights should be protected. Above all, the caregiver should be consistent and fair when dealing with children.

Discipline problems occur when children are bored, over stimulated, when they are rushed or have to wait. A carefully

prepared schedule of activities that is well balanced, based on their attention span, and age appropriate, keeps the children involved and helps avoid excessive discipline problems. A daily routine can give the children a sense of security and establish a sequence of events that take place during the day. If changes are going to occur in the schedule on a particular day, the caregiver should let the children know in advance what to expect. Ignoring inappropriate behavior and redirecting a child engaged in an unwanted activity helps to avoid a confrontation between the caregiver and the child. Helping children to solve their own problems is also another effective discipline technique.

A knowledgeable caregiver plans interesting and age appropriate activities for the children in her care. She prepares the necessary equipment and materials she needs ahead of time. She decides whether all of the children will be involved. She considers whether she has to rearrange the room and has an alternative plan for children who will not be involved. She considers how to handle clean-up and what she will do with the results of the activity. She plans both structured and unstructured activities as well as a variety of activities that are interesting to the children.

A daily schedule is very important for the effective management of the caregiver's time. In addition to activities, toileting, nap time, lunch and snack time are included in the schedule. Without a schedule, the day can seem very long and both children and caregiver can be bored, restless, irritable and short tempered.

With a schedule, the caregiver is able to effectively plan her personal tasks around the children's schedule. Making important telephone calls, preparing dinner, washing clothes and light housekeeping tasks should be done during nap time.

Communicating effectively with parents is another important training area. Agreement between the parent and the caregiver is important in matters of toilet training, weening a child from the bottle, discipline, telling children about sex and how long a child should nap. Both parent and caregiver should share ideas. When talking to a parent about a child's behavior, the caregiver should tell the parent about positive, as well as negative, behavior traits. The caregiver should be warm and friendly toward parents and remember that both the caregiver and the parents are responsible for the child's well being and happiness. At the conclusion of the basic training program, all caregivers should be familiar with the objectives set forth in the program. Fundamental competency in the aforementioned areas of study is expected of the caregivers who complete the training. Monitoring of the homes twice a month by the trainers should help the caregivers to maintain high quality standards of child care.

Training the caregiver to work effectively with the children and communicate effectively with the parents is the primary focus of the Latchkey Family Day Care Home training program, although other areas were included. Non-credentialed caregivers are required to have 20 hours of training a year, and credentialed caregivers are required to have 10 hours of training a year. A credentialed

caregiver has a high school diploma while a non-credentialed caregiver does not. Providing resource materials, home visits and Inservice Days will help the caregivers broaden their training base and meet their annual training requirements. They are also encouraged to take courses offered at the community colleges and at The Juvenile Welfare Board for down-county caregivers and The Cooperative Extension Service Building for up-county Family Day Care Providers. The license board requires all caregivers to take a two hour course in child abuse designed specifically for Family Day Care Home Providers. A certificate is awarded upon completion of the course. Project Playpen also offers on-site training for caregivers in nutrition. Inservice credit is given by Latchkey to all caregivers who complete this training.

Appropriate activities have been role modeled for the caregivers by the Latchkey specialists who interact with the children when visiting the homes. The caregivers are encouraged to follow through by repeating these activities with the children between visits. Phone contact between visits is encouraged between the caregiver and the specialist if the caregiver has difficulty implementing the activities. Workshops in "Learning Activities" and "Music for Infants and Toddlers" were presented during the Inservice Day Program in November. Materials were provided by the trainers and the caregivers were encouraged to try these activities in their homes with the children. All caregivers have been encouraged to join the toy lending library sponsored by the License board. Volunteers deliver and pick up toys that are age appropriate

for the children in the homes. Caregivers have been given a list of basic supplies that they should purchase in order to implement the activities shown to them by the trainer. A monetary incentive has been offered to caregivers who exceed the minimum standards set by the agency in experience, equipment and training. Each caregiver in the home received a manual explaining some basic rules, regulations and suggestions for managing the home. A set of activity cards have also been distributed to the caregivers so that they have a reference on-site for age appropriate activities. The developmental needs of the children in the home have been assessed by the specialists who help the caregivers plan appropriate activities to further the growth and development of these children. The caregivers are guided in developing good relationships with the parents of the children in their care. Parents have been asked to evaluate the home through responding to a survey concerning the quality of care. Networking has been encouraged through a telephone support system and planned covered dish suppers to help the caregivers become acquainted with one another and share ideas and concerns. Professionalism has been encouraged by making the caregivers aware that they are part of a network that is dedicated to improving the quality of child care.

The Site Manager and Assistant Site Manager participated in a Baby Fair on October 26, 1985, at Mease Hospital in Dunedin, Florida. Many parents and their children attended. It gave the Site Manager and her assistant an opportunity to make the public aware of Latchkey's program for infants and toddlers

and answer questions they had about Latchkey's Services for Children. Events such as the "Baby Fair" heightens public awareness of the growing professionalism in the field of child care.

In general, this plan was successful because it heightened parent awareness toward good developmental day care; added to the skills of the caregiver; met the developmental needs of the children; and increased the quality of the daily experience in the Family Day Care Home.

In the pre-implementation of the practicum, permission was granted by the Deputy Executive Director of Latchkey, Inc., to enlist the cooperation of the Family Day Care Home supervisors and the caregivers to conduct the pilot program. As the Site Manager for the Latchkey Family Day Care Homes in Pinellas County, permission to enter the homes and conduct a training program for all the caregivers was no longer necessary during the implementation of this practicum.

Report of Action Taken

During the implementation of this practicum (October - December, 1985) the following actions were taken by the Site Manager of The Family Day Care Home Network:

- a daily schedule was developed for the Site Manager and Assistant Site Manager.
- two home visitations per month for each caregiver were included in the schedule.
- on-site activity workshops were conducted for each caregiver.

- the trainer provided one hour of training for the caregivers each month.

- the homes were monitored twice a month by the Site Manager and the Assistant Site Manager, in order to be certain that the caregivers were maintaining standards set up by the License Board.

- an Inservice Training Day was planned for the caregivers on November 21, 1985. Attendance was mandatory. All the Family Day Care Homes were closed on that day. Workshops in "Learning Activities", "Music for Infants and Toddlers" and "Child Development" were offered in the afternoon. The Juvenile Welfare Board Library provided audio/visual aides to supplement the "Child Development Workshop". Guest speakers were invited from the License Board's staff, Project Playpen and the Social Services Department of the Latchkey Central Agency. (Appendix O).

- a career ladder was developed for the caregivers who qualify by exceeding the standards set up by the agency in experience, equipment and training. An increase in the daily reimbursement per child, received by the caregivers, may be earned if they qualify for commendable status.

- a written and oral assessment was developed for the caregivers who wish to qualify for commendable status in the career ladder program.

- a parent satisfaction survey was developed and sent to all parents by mail in January, 1986.

- the Site Manager and Assistant Site Manager participated

in a Baby Fair on October 26, 1985, at Mease Hospital in Dunedin, Florida. Eight hundred people attended. The purpose of participating in the fair was to make the public aware of the services that Latchkey offers as an agency for infants and toddlers. (Appendix P).

- the Site Manager and Assistant Site Manager participated in another Baby Fair on January 18, 1986, at Maas Brothers in Clearwater, Florida.

- forms were developed for monitoring the caregiver's records and the children's records. These forms are on file at the office. The caregivers keep their personnel/children's records on file in the home. When the Site Manager and Assistant Site Manager monitor the home they check the caregiver's files to be certain that all information is current and present in the file. A client control sheet was developed, listing information on each client in the home as a master reference source. (Appendix Q).

- when the caregivers began the training program in August, they had not completed their training requirement for the year. The training status was reported on a computer print-out sheet in August. The computer print-out sheet in December shows the training gains made by each caregiver since September through the training program.

- a monthly newsletter was developed and sent to all the caregivers by mail. Notices of meetings and hints on how to improve the caregiver's professional image and overall performance are included in the newsletter.

- a daily schedule was given to each caregiver that included

time for planned indoor and outdoor activities, meals, toileting, nap and free play. Each caregiver was given a set of activitiy cards for children in a file box to keep in the home. (Appendix R).

CHAPTER V

Results, Conclusions, and Recommendations

Results

The objectives listed in Chapter III were:

- to develop a pilot project involving three family day care homes.

- to assist the caregivers in meeting the annual training requirement.

- to design and implement a caregiver's training program on-site.

- to help the caregiver plan and implement activities that would meet the developmental needs of the children in the home.

- to establish on-site training programs in all the Latchkey Family Day Care Homes.

- to develop a system of evaluation to measure the effectiveness of the training program.

The first objective was achieved in the pre-implementation of the practicum. Three Family Day Care providers agreed to participate in an on-site training program. Each provider received six hours of on-site training.

In the implementation of the practicum, each caregiver, with the exception of one who took a leave of absence for personal reasons, completed the annual training requirements by December 31, 1985, as shown in Appendix L. The training program outlined in Appendix E was implemented in October, 1985. The trainers visited the homes during the implementation of this practicum

in order to help the caregiver upgrade her skills and complete the annual training requirements. The second objective was achieved through this program.

The third objective was met because the training program was conducted on-site. The Site Manager and Assistant Site Manager visited each caregiver's home and scheduled a sufficient amount of training time to make up for each caregiver's deficiency in training hours.

The activity workshops conducted on-site during this training program and the activity workshops conducted during Inservice Day helped to meet the fourth objective. A set of activity cards for infants based on Piaget's sensorimotor activities were given to each caregiver in a 5 x 8 file box so that she would have an available reference on-site.

The fifth objective was achieved when the author was appointed Site Manager for the Latchkey Family Day Care Homes in Pinellas County. She was then in a position to design and implement an on-site training program in all the Family Day Care Homes. This was implemented in the fall of 1985. Every caregiver received one hour of training a month.

The evaluation procedure to measure the effectiveness of the on-site training program is directly related to the career ladder program. A written and oral examination were developed to test the provider's knowledge in the field of child care. A list of equipment provided by the caregiver must meet the standards outlined for commendable status by the agency. Evidence of

training over and above the basic requirements must be documented by the trainer for the caregiver. Caregivers who achieve commendable status will help the Family Day Care Home Network achieve the sixth and final objective. Since the training program has just begun, it is not expected that this objective will be reached at present. It is anticipated that most of the caregivers will reach it by July 1, 1986.

In August there were thirty-eight caregivers in the network. Now there are thirty-one. Some of the caregivers resigned because they did not wish to take part in a training program that would upgrade their professional status. When they decided to become caregivers, they viewed the position as equivalent to "babysitting". Resistance to change on the part of the caregivers was one of the major difficulties encountered by the trainers.

Another difficulty experienced by the trainers was moving from one location to another. There was a change of phone number and address. Until all the caregivers and clients were made aware of the new location and the phone was installed, communication was interrupted and maintaining daily operations was difficult. An Assistant Site Manager was hired in September of 1985, and trained by the Site Manager to help with the training program. She was promoted to the position of Site Manager for a school-age center by the Personnel Department of the agency in November of 1985. A new Assistant Site Manager had to be hired and trained, which interrupted the flow of the training program. The caregivers had to adjust to a new personality when they were already having

problems adjusting to a new system of operation.

Conclusions

The location of the pilot homes in the bay area of Pinellas County was discussed in Chapter I. The locations of three out of thirty-one homes were identified. All but twelve of the homes are located in South St. Petersburg. The remaining twelve are located in North St. Petersburg, Largo, Clearwater, Safety Harbor and Tarpon Springs. All but one of the providers are African Americans. Seventy-five per cent of the caregivers do not have a high school diploma. Most of the homes are clean and neat and the caregivers provide adequate custodial care. Record keeping, following a schedule and providing a program of developmental activities for children however, are areas of weakness. The caregivers, while licensed, have difficulty maintaining the rules and regulations set forth by the license board. They apply the same standards of child care to the children of their clients that were applied to their own children. Infant stimulation programs are relatively new and unfamiliar to the caregivers.

Acquiring the training to become proficient in this field takes time and dedication. Most of the caregivers simply entered the field to supplement the family income. Belonging to an agency was advantageous because the agency placed children with them and they did not have to solicit their own clients. They are not prepared, however, to make a commitment to become the professional caregiver encouraged to enter the field today.

The children in the homes are from low income families. There

are black, white and asian children in the homes. All the children are under three years old. Three of the four children in the homes are under two years old. All of the families are subsidized by Title XX funds. No one can afford full fee. Most of the children are from single family homes. Many of the single family clients are on AFDC. Some of the children are placed by the Department of Health & Rehabilitative Services. These children are under Protective Services. Some of the single parents are teenagers who attend high school, while others attend college or vocational school or hold jobs. A small percentage of the children come from homes where both parents work.

The parents express an interest in child care that is reliable. Many of them would be in danger of losing their jobs if the caregiver could not provide service. They are concerned that their children receive adequate custodial care. Their major areas of concern are: feeding, cleanliness, diaper changing and adequate rest. If the child is ill they expect the caregiver to nurse it back to health. Parents do not like to miss a day of work because they have to stay home to care for an ill child. Caregivers do not want to accept the child that day because they do not want to expose other children in the home to illness. A facility is needed to care for children who are ill, away from the caregiver's home, so that the parent does not have to interrupt his/her work schedule. Therapeutic Family Day Care Homes have been recently developed for exceptional children in Pinellas County, Florida. Why not develop centrally located Day Infirmaries for children who have

illnesses not requiring hospitalization?

> "Chicken Soup is Minnesota's only licensed day care center for sick children. There are fewer than a dozen such centers in the nation", said Beth Fredericks, Project Coordinator of the Boston-based Work Family Directors, a national child care referral network. (Del Valle, 1985 p. 5A).

Parents do not always observe the service hours provided by the caregivers. They either bring the child early or pick up the child late. Late fees set by the agency and payable directly to the caregiver are difficult to collect unless the parent is threatened with termination of service. Weekly fees payable to the agency by clients are also difficult to collect from some parents even though their fee is subsidized. Parents need budgeting counselling so that they can pay their fees on time. All of the parents in the program either have their fee subsidized 100% or pay a minimal fee because they qualify for Title XX funding. The paper work and time spent by the Family Day Care Home staff in collecting fees limits the time available to train caregivers and develop suitable programs for children. Parent, caregiver and Family Day Care staff relationships are often strained over fee collections.

Parents and caregivers often fail to communicate with each other concerning the special needs of the children in care. The Family Day Care staff are often asked to serve as mediators in a dispute between parent and caregiver. Both parents and caregivers need to improve their communication skills. Neither the parent or the caregiver fully understand the developmental needs of the

children, and place a low priority on a program of developmental activities in the home. Both training for the caregivers, as well as an educational program for the parent, is needed if a quality child care program is to be achieved. Accepting responsibility for their part in helping to achieve quality care must be assumed by both. A parent letter sent out quarterly describing a quality Family Day Care Home Program and outlining caregiver/parent responsibilites and agency/parent responsibilities, may help to eliminate some of the misunderstanding that occurs.

The program of activities provided by the trainers for the children in the home must reflect not only the abilities and limitations of the caregivers but must meet the developmental needs of the child. Many of the parents may be too tired to meet these needs at the end of the day. Therefore, if the caregiver does not meet them during the day, the children will not progress from one developmental stage to the next on time. Children need quality of time and attention from adults if they are to realize their cognitive, social, emotional and physical potential as they are growing toward maturity.

At the end of the implementation period the caregivers were beginning to feel part of a network and were more receptive to the on-site training program then they were in the beginning. Even though they were given a schedule and participated in training during the on-site visits, follow through on the part of the caregivers was not observable in all homes. It is apparent to the staff that it will take time to reach the level of professionalism

that the agency would like to achieve in the Family Day Care Home Network.

Recommendations

The following suggestions are recommended to improve the quality of Family Day Care:

1.) To encourage professionalism by continuing to offer training opportunities for caregivers. A second Inservice Day was scheduled on March 21, 1986.

2.) To continue to participate in community activities such as "baby fairs" where the purpose is to increase parent education in the field of child care.

Dissemination

This practicum was shared with the administrative staff of Latchkey, Inc., and in particular with the members of the Direct Services Division. Many of the suggestions have been accepted and approval was given for implementation in the work setting. It is through sharing the practicum that the author was given the opportunity to become the Site Manager for Latchkey Family Day Care Homes and encouraged to reorganize the system to achieve greater professionalism within the Family Day Care Home Network.

Further dissemination of the practicum may be achieved through speaking at a state or regional conference and summarizing the material for inclusion in one of the day care publications.

References

Adams, D.B., (1978) Family Day Care Curriculum and Instruction 481. (Report No. PS-011-792) Madison, Wisconsin: Wisconsin University, Madison University Extension (ERIC Document Reproduction Service No. ED 196 521)

Anderson, E.A. (1981) The Politics of Family Day Care: Legislatively What Can Be Done (Report No. PS-012-995) Milwaukee, Wisconsin: Paper presented at the annual meeting of the National Council on Family Relations (Milwaukee, WI. October 16, 1981) (ERIC Document Reproduction Service No. ED 220 194)

Bennetts, L. (1984, September 17) Quality of day care varies dramatically. St. Petersburg Times p.p. 1D - 8D

Brazelton, T.B. (1982 - February) What you should look for in infant day care. Redbook Magazine p. 56

Caldwell, B.M. (1984 - August) Sexual abuse and day care. Working Mother, p.p. 16-19

Del Valle, Debora (1985, November 16) If your child has a cold and you must work, try "Sniffles Room". St. Petersburg Times p. 5A

Elgas, P. (1981) Home Based Information Packet. (Report No. PS-012-413) Washington, D.C. Administration for Children, Youth and Families. (DHHS). (ERIC Document Reproduction Service No. ED 207 695)

Galinsky, E. (1982 - February) Child Care: a career option for full-time mothers. Redbook Magazine p.p. 49-54

References

Gorelick, M.C. (1978) Survey of Staff Preparation for Infant/ Toddler Development Program. (Report No. PS-010-593) Los Angeles, California: California State University, Northridge. (ERIC Document Reproduction Service No. ED-171-389)

Hoffenberg, E., Muenchow, S. (Eds.) Public Forum on Child Day Care and Child Abuse Unpublished manuscript. (available from [The Governor's constituency for children, 235 Carlton Building, Tallahassee, Florida, 32301]).

Johnson, C., Thompson, B., and Adkins, J. (Eds.) 1985, Preventing Abuse and Neglect in Child Care Unpublished manuscript, Tallahassee, Florida: State of Florida Health and Rehabilitative Services.

Laws of Florida Chapter 61-2681 (1961) amended by chapter 70-893, (1970) (available from [The Pinellas County License Board for Children's Centers and Family Day Care Homes, 4140 49th Street North, St. Petersburg, Florida]).

Majeed, A. (1983) Casper Family Day Care Study. (Report No. PS-014-151) Casper (city) WY.: Nutrition and Child Development, Inc. (ERIC Document Reproduction Service No. ED 243 570).

Mauk, P. and Gogerty, P. (1982, May-June) Workshops on wheels bring training to day care door. Children Today, p.p. 7-35.

References

Miller, G. (1985) Child Care Opportunities Act of 1985. Summary presented at a meeting of the Congress of the United States, House of Representatives. Washington, D.C.

National Association for the Education of Young Children, (1984 - November) NAEYC adopts position on family day care regulation. Young Children. p.p. 56-57.

Poresky, R.B. (1979) A Community-Based Day Care Home Training and Support System in Kansas. Evaluation Report of the Demonstration Project. (Report No. PS-011-003) Manhatten, Kansas: Kansas State University, Department of Family and Child Development. (ERIC Document Reproduction Service No. ED 178 214).

Porter, C. (1981) Professionalism and Day Care: Friend or Foe? (Report No. PS-012-572) Coral Gables, FL.: University of Miami, Paper presented at the conference on Child Care Education (Coral Gables, FL., November 13, 1981). (ERIC Document Reproduction Service No. ED 211 201)

Squibb, B. (1976) Family Day Care: Resources for Providers. (Report No. PS-009-114) Washington, D.C., National Association for the Education of Young Children. (ERIC Document Reproduction Service No. ED 143 414).

References

Taylor, H.L.S. (1984) A Cooperative Model for Family Daycare Training. (Report No. JC-840-228) Snohomish County, Washington: Edmonds Community College, Department of Early Childhood Education. (ERIC Document Reproduction Service No. ED 244 657).

Texas State Department of Community Affairs (1976) The Family Day Care Home System: What Is It? How Does It Work? A Comparison of Eight Family Day Care Home Systems in Texas. Austin, Texas: Office of Early Childhood Development. (ERIC Document Reproduction Service No. ED 130 797).

Winget, M., Winget, G. and Popplewell, J. F. (1982) Including parents in evaluating family day care homes. Child Welfare LXI (4), p.p. 16-19.

Working mothers, changing lives. (1982, August) Newsweek Magazine, p. 19.

APPENDIX A

CENTER SUMMARY OF TRAINING
AUGUST - 1985

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F.D.C.H. NETWORK

Center Summary of Training: AUGUST 1, 1985 Center:

	Name	Position	Date of Hire	Hours Worked Wkly.	C/NC	Training Hours Required	Training Hours Completed	Requirement Completed Yes/No	Overall Com.	Comment
1		CAREGIVE	05/20/84	40.0000	NC	20.0000	14.5000	NO		
2		CAREGIVE	09/11/84	40.0000	NC	20.0000	11.0000	NO		
3		FDLH	06/19/85	40.0000	C	5.00000				
4		CAREGIVE	12/09/82	40.0000	C	20.0000	8.00000	NO		
5		CAREGIVE	07/01/84	40.0000	NC	20.0000	7.50000	NO		
6		CAREGIVE	03/30/84	40.0000	NC	20.0000	7.00000	NO		
7		CAREGIVE	11/05/82	40.0000	C	10.0000	11.0000	YES		
8		CAREGIVE	07/01/84	40.0000	C	10.0000	10.5000	YES		
9		CAREGIVE	10/10/84	40.0000	NC	20.0000	14.0000	NO		
10		FDLH	05/06/85	40.0000	C	5.50000	3.00000	NO		
11		CAREGIVE	09/23/84	40.0000	NC	20.0000	14.5000	NO		
12		CAREGIVE	10/22/84	40.0000	NC	20.0000	7.00000	NO		
13		CAREGIVE	11/11/83	40.0000	NC	20.0000	14.5000	NO		
14		CAREGIVE	10/10/83	40.0000	NC	20.0000	14.0000	NO		
15		CAREGIVE	11/11/83	40.0000	C	10.0000	4.00000	NO		
16		CAREGIVE	02/06/84	40.0000	C	10.0000	12.0000	NO		
17		CAREGIVE	11/01/84	40.0000	NC	20.0000	13.5000	NO		
18		FDLH	04/23/85	40.0000	NC	13.0000	8.00000	NO		
19		CAREGIVE	12/01/84	40.0000	C	10.0000	12.5000	NO		
20		CAREGIVE	08/22/84	40.0000	C	10.0000	8.00000	NO		
21		FDLH	04/01/85	40.0000	C	7.50000	6.00000	NO		1 COMPLETE
22		FDLH	05/24/85	40.0000	NC	10.0000				
23		CAREGIVE	12/09/84	40.0000	NC	20.0000	5.50000	NO		
24		CAREGIVE	04/24/83	40.0000	NC	20.0000	10.5000	NO		

F.D.C.H. NETWORK

Center Summary of Training: AUGUST 1, 1985 Center:

	Name	Position	Date of Hire	Hours Worked Wkly.	C/NC	Training Hours Required	Training Hours Completed	Requirement Completed Yes/No	Overall Com.	Comment
1		FDLH	05/12/85	40.0000	NC	13.4000	5.00000	NO		
2		FDLH	05/01/85	40.0000	NC	13.0000	0.00000	NO		
3		CAREGIVE	11/01/83	40.0000	NC	20.0000	22.5000	YES		CCR CMPLT 6/28/85
4		CAREGIVE	10/05/83	40.0000	NC	20.0000	9.50000	NO		
5		CAREGIVE	03/01/85	40.0000	C	10.0000	4.00000	NO		
6		CAREGIVE	09/17/84	40.0000	NC	20.0000	21.0000	YES		CCR CMPLT 6/28/85
7		CAREGIVE	08/01/83	40.0000	NC	20.0000	11.0000	NO		
8		CAREGIVE	01/01/83	40.0000	NC	20.0000	17.5000	NO		
9		CAREGIVE	11/01/83	40.0000	NC	20.0000	11.0000	NO		
10		CAREGIVE		40.0000	NC	20.0000	9.00000	NO		
11		CAREGIVE	08/01/83	40.0000	NC	20.0000	11.0000	NO		
12		CAREGIVE	05/07/84	40.0000	C	10.0000	3.00000	NO		
13		CAREGIVE	10/15/84	40.0000	C	10.0000	12.0000	YES		
14		CAREGIVE	08/21/84	40.0000	C	10.0000	2.00000	NO		
15		CAREGIVE	02/14/83	40.0000	NC	20.0000	5.00000	NO		
16		CAREGIVE	12/02/83	40.0000	NC	20.0000	10.2000	NO		
17		CAREGIVE	08/07/84				11.5000	NO		
18		CAREGIVE		40.0000	C	10.0000	1.00000	NO		
19		CAREGIVE	01/07/83	40.0000	NC	20.0000	9.50000	NO		
20		CAREGIVE	10/05/83	40.0000	NC	20.0000	12.5000	NO		

APPENDIX B

SUMMARY OF ACTIVITIES - PILOT STUDY

SUMMARY OF ACTIVITIES
CONDUCTED IN FAMILY DAY CARE HOMES
DURING THE PILOT STUDY

Session One:

General Orientation

- Reviewed daily schedule
- Assessed the needs of the caregiver
- Assessed the needs of the children
- Inventoried the equipment and toys in the home
- Arranged a schedule for future visits
- Presented the caregiver with a catalogue featuring Early Childhood Equipment

Session Two:

Purpose	Activity 1	Description
To develop rhythm & encourage coordination through movement to music	Music	Children marched and played musical instruments to recorded music.
	Activity 2	
To experience texture To develop fine motor skills	Finger Painting	Children each created their own picture by dipping their fingers in paint & stroking the paper with their fingers.
	Activity 3	
To develop large motor skills	Catch & throw a large ball	Children formed a circle outdoors and attempted to catch & throw a ball to the caregiver who stood in the center of the circle.

Session Three:

Purpose	Activity 1	Description
To encourage language Develop imagination	Story Time	The caregiver read the children a story and encouraged them to comment on the pictures in the book.
	Activity 2	
To identify body parts & articles of clothing	Dressing Paper Dolls	Children were introduced to Michael & Tara. Parts of the body were identified. The dolls were dressed and undressed in different outfits. Articles of clothing were identified.
	Activity 3	
To develop eye/hand coordination	Throwing balls at a felt board	Children were each given 2 small felt balls & instructed to throw the balls at a board with a large ice-cream cone painted on it. The balls stuck to the cone.

Session Four:

Purpose	Activity 1	Description
To stimulate language	Cutting & pasting pictures from a magazine	Caregiver cut & pasted pictures of food, family members, rooms in a home, cars, animals & flowers in a magazine. Children were encouraged to identify & talk about the pictures.
	Activity 2	
To bring some of the pictures shown in the scrap book in Activity 1 to life. Children experienced the taste & texture of the food & socialized with their peers.	Snack Time	Children were asked to sit at a table in the kitchen. The caregiver served a portion of a banana, orange, juice & cookies to each child. These food items were in the scrapbook they observed in Activity 1.

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Session Four, Con't.:

Purpose	Activity 3	Description
To develop fine motor skills	Crayons & Paper	Children were given large flat crayons & paper. They created pictures by scribbling on the paper with the crayons.

Session Five:

Purpose	Activity 1	Description
To develop eye/hand coordination. To develop fine & gross motor skills	Dip & Stroke	Children were given a long paint brush & a bucket of water. The water was brightly colored with paint. Newspapers were taped at eye level to a fence in the yard. They were encouraged to dip the brush in the bucket & stroke the paper with the brush, creating a picture.
	Activity 2	
To develop the pincer grasp	Clipping Pins on a Can	Children were given clothes pins that opened & closed with a spring action. They were encouraged to place the pins around the rim of a coffee can.
	Activity 3	
To encourage problem solving	Basket Stack	Children were given plastic strawberry baskets to stack in a high column.

Session Six:

Purpose	Activity 1	Description
To encourage problem solving	Unwrap the Stick	Craft sticks were wrapped in foil. Each child was given a stick to unwrap.

Session Six, Con't.:

Purpose	Activity 2	Description
To develop large motor skills	Walk & Jump	Eight large feet were cut out of construction paper & taped to the floor, slightly in front of one another. The children were encouraged to place one foot at a time on the footsteps & walk forward. The footsteps were then placed side by side & the children were instructed to place both feet on the footsteps and hop forward.
	Activity 3	
To match pieces of a puzzle	Match the Pictures	Large pictures were cut from a magazine & glued to cardboard. Then they were cut in half. Children were asked to identify the top & bottom of the picture & place them together. Later on the pictures can be cut in four pieces and matched.

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APPENDIX C

DO IT YOURSELF PROJECTS

DO IT YOURSELF PROJECTS

The following is a list of 15 items that the caregiver can make at home using a little imagination.

Item	Materials	Instructions
Play House Store Tunnel	Refrigerator Cartons Tape Scissors Paint	Cut and fold carton to shape. Cut out windows, doors and passageways. Paint appropriate decorations on carton.
Store Items	Cans, Food and Beverage containers	Wash, dry and use empty containers from food purchased at store.
Mirror	Cardboard Foil Tape	Tape foil over cardboard.
Button Book	Yarn or ribbon Buttons and crayons Heavy art paper Hole punch & glue Crayons	Make a simple drawing of pants, blouse or shirt and paste buttons in appropriate places. Color items and secure book with yarn.
Picture Book	Construction paper Magazine pictures Scissors Glue Yarn	Cut out pictures of items in categories such as animals, flowers, people, etc. Paste pictures in book and secure with yarn.
Rag Dolls	Sock Yarn Stuffing Scissors Felt	Cut the toe out of the sock and make a V cut at opening to form two legs. Sew up each leg. Cut the toe into two pieces and use as arms. Sew to upper part of sock. Stuff sock. Tie a piece of yarn around neck to form head. Cut out eyes, nose and mouth of felt and sew on face. Decorate with yarn at neck, top of head, ankles and wrists.
Finger Puppet	Cardboard Magazine pictures String Paste Scissors Hole punch	Cut a picture from a magazine, paste it on cardboard. Punch a hole at the top and tie a string through the hole for the child's finger.
Puzzle	Magazine picture Cardboard Glue Scissors	Cut a large magazine picture into four or more pieces. Glue to cardboard cut to shape. Pieces should fit together to form a puzzle.
Boot Lacer	Shoelace Tagboard Scissors Hole punch	Draw a boot on a piece of tagboard. Cut it out. Punch holes along the front and lace the boot with shoelaces.
Spool Tray	Tagboard strip Paint Large threading spools Brush	Cut a strip of tagboard. Paint three circles on the board in different colors. Paint each spool to match a color on the board so that the child can place the spool on the matching circle.
Stacking Toy	Plastic Strawberry boxes	Collect twenty boxes and use to stack one within the other to form a high tower.
Inch Worm	Egg carton, Glue Pipe Cleaners Scissors Felt, Paint, Brush	Use the bottom of the carton. Turn it over and paint it green. Use felt and pipe cleaners for head features.
Tether Ball	Plastic six pack Holders, Rope & ball	Tie the holders together to form a cradle for the ball. Insert the ball into the cradle. Tie a rope to the holders and suspend the ball.

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APPENDIX D

DAILY SCHEDULE

DAILY SCHEDULE

7:30 - 8:30	Infants and/or toddlers arrive
	Health Check
8:30 - 9:15	Breakfast
	Toileting
9:15 - 10:15	Outdoor Play
10:15 - 11:15	Indoor Activities
11:15 - 12:00	Lunch
12:00 - 12:30	Toileting/undressing for nap
12:30 - 2:30	Nap
2:30 - 3:00	Toileting/dressing for activities
3:00 - 3:30	Snack
3:30 - 4:15	Outdoor Play
4:15 - 5:00	Indoor Play
5:00 - 5:30	Clean-up
	Dismissal

NOTE: Indoor and outdoor activities are both structured and unstructured. Periods of free play should be included within these times. Suitable toys and materials should be provided. Infant stimulation activities should be conducted when the infant is receptive to them. Toileting is provided in the schedule but will also take place as the need arises. Individual attention should be provided for each child by the caregiver. When the child is picked up, time should be allotted for the parent.

APPENDIX E

TRAINING PROGRAM F.D.C.H. PROVIDERS ORIENTATION

TRAINING PROGRAM F.D.C.H. PROVIDERS
ORIENTATION

SESSION #1
1 Hour

Orientation to Training Program. Equipment needed to implement activities.

SESSION #2
1 Hour

Latchkey Rules & Regulations for Caregivers - Part I

Caregiver/Parent Responsibilities
Scheduled Hours and Late Fees
Attendance (Reimbursement and Salaries)
Food Regulations (License Board - Project Playpen)
Record Keeping and Posted Materials (Staff & Children)
Training Requirements (State & Local)

Activities for Children - Part II

SESSION #3
1 Hour

A Developmental Approach to Learning - Part I

Equipment and Toys (Indoor - Outdoor)
Daily Schedule

Activities for Children - Part II

SESSION #4
1 Hour

Behavior - Part I

Realistic Behavior Expectations for Children
Appropriate Discipline Techniques for Unacceptable Behavior
Setting Limits
Child Abuse (Identify and Report)

Activities for Children - Part II

SESSION #5
1 Hour

Nutrition - Part I

How to Handle the Child Who Won't Eat
Establish Table Etiquette
Using Clean Utensils or Disposables
Introducing Child to New Foods
Infant Feeding

Activities for Children - Part II

SESSION #6
1 Hour

Health - Part I

Toilet Training
Hand Washing
Storage of Wet or Soiled Clothing
Storage of Additional Clothing
Storage of Individual Sheets (Cots if Used)
Individual Wash Cloths and Towels (Disposables)
First Aid Procedure

Activities for Children - Part II

SESSION #7
1 Hour

Safety - Part I

Fire - Tornado Drills
Electrical Storms and Safety
Outdoor Hazards (unsafe equipment)
Fencing and Locked Gates
Screened Doors and Windows Secured
Indoor Hazards (Safe play, dining, rest and toileting space)

Activities for Children - Part II

SESSION #8
1 Hour

Naptime - Part I

Cots or Mats should be spaced two feet apart with clean sheets for toddlers
Beds Shared by Toddlers should be covered by a clean sheet for each child.
Cribs and Playpens should be used by infants.

Activities for Children - Part II

SESSION #9
1 Hour

Dealing with Parents - Part I

Developing a Good Relationship with Parents
Sharing Children's Daily Experiences with Parents at Pickup Time
Dealing with a Difficult Parent
How to Handle Parents who Consistently Pick up Children Late

Activities for Children - Part II

SESSION #10
1 Hour

Summary of Training Program - Part I

Evalutation of Training Program - Part II

SESSION #11
1 Hour

Home Management

Handling Uninvited guests or Unexpected Phone Calls
Handling Emergency Repairs in the Home
Accomplishing Personal Chores
You and Your Substitute

SESSION #12
1 Hour

Career Development

Qualifying as a Caregiver
Achieving Commendable Status as a Caregiver
Achieving Exceptional Status as a Caregiver

APPENDIX F

TRAINING DOCUMENTATION

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CENTRAL AGENCY, DISTRICT V
State Purchase of Service Child Care Program

LATCHKEY
Services for Children, Inc.

Date_____

INDIVIDUAL TRAINING STATUS REPORT FOR FAMILY DAY CARE GIVER

NAME_____ SOCIAL SECURITY #_____

ADDRESS_____

DATE OF HIRE_____ NETWORK_____

High School Diploma? No Yes (Proof of education must be attached)

Central Agency Approval

Training Requirement for Family Day Care Givers

Family Day Care Givers who have a high school education are required to participate in a minimum of ten (10) contact hours of training annually. Care Givers without a high school diploma are required to participate in a minimum of twenty (20) contact hours of training annually from any of the following areas: rules and regulations, health and safety, child development and behavior management, and programming and activities. This requirement may be met through central agency training, college credit and non-credit courses in ECE, approved community workshops, and LATCHKEY in-service training sessions. All training must be documented and approved by the Training Department of LATCHKEY, Inc.

IMPORTANT: Attach approved documentation forms (yellow copy) to this ITS form when submitting to Central Agency at the end of the year.

[redacted]

NUMBER OF TRAINING HOURS REQUIRED THIS YEAR _____

Total Hours:_____ Number of Hrs. Completed to Date:_____

Certificate Issued: ☐ Yes ☐ No Date:_____

Reviewed by:_____

[redacted]

CENTRAL AGENCY, DISTRICT V
State Child Care Training Program
1712 East Bay Drive, Box 12
Largo, Florida 33541

LATCHKEY
Services for Children, Inc.

TRAINING DOCUMENTATION

Training Topic _____ Social Security # _____
Training Date(s) _____ Name_____
Training Site _____ Address _____
Number of Hours _____ City _____ Zip _____
Sponsored By _____ Date of Birth_____ Sex: M F
Race: (circle one) Black Hispanic White Asian American Indian

I request that this training be counted toward for following:

_____ Child Care Worker Part I
_____ Child Care Worker Part II
_____ Child Care Worker Part III
_____ Child Care Worker Part IV
_____ Family Day Care Orientation
_____ Annual In-Service Training

_____ LATCHKEY Approved _____
Signature of Trainer

CA17-1/88 WHITE copy - Central Agency YELLOW copy - Center

APPENDIX G

MONITORING EVALUATION FORM

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MONITORING REPORT SHEET

Caregiver _____ License Capacity _____

DATES:

CAREGIVER FILE:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Agreement												
Child Abuse Training												
References												
Physical												
T.B.												
TDH Form												
Training Slips												
Job Description (Signed/Dated)												

CHILDREN'S FILE:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
ID Form												
Emergency Numbers (2)												
Notarized Emergency Treatment Form												
Physical												
Immunization Record												

POSTED:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Daily Schedule												
License												
Fire Drills & Emergency Plan												
Hours												
Attendance												

AVAILABLE FOR INSPECTION:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Medication Log												
Accident/Illness Log												
Admission Documentation												
First Aid Kit												

OUTDOOR FACILITY:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Sun/Shade												
Free of Hazards												
Enclosed As Required												
Developmental Equipment												

DATES:

INDOOR FACILITY:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Play Space												
Toilet Facilities and Supplies												
Medication/Poisons Out of Reach												
Individual Sheets/Towels/Washcloths												
Pets Immunized												
Electrical Outlets Covered												
Windows/Doors Screened												
Adequate Lighting/Ventilation/Temperature												
House Clean/Free of Vermin												
Child Isolation Area- Ill												
Heat Facilities												

PROGRAM:	C	NC	C	NC	C	NC	C	NC	C	NC	C	NC
Age Appropriate Toys												
Constructive Discipline												
Adequate Supervision												
Daily Activities Planned												
Daily Health Checks												
Staff/Child Ratio												

COMMENTS:

_____

_____

_____

_____

_____

_____

MONITORED BY: (Initials only) _____ _____ _____ _____ _____ _____

APPENDIX H

CORRECTIVE ACTION STATEMENT

LATCHKEY

FAMILY DAY CARE HOME VISIT

DATE: _____

CAREGIVER: _____ TIME: FROM _____ TO _____

PURPOSE: __ PLACEMENT __ MONITORING __ CONFERENCE __ TRAINING

GENERAL COMMENT(S): _____

_____

CORRECTIVE ACTION(S) REQUIRED: _____

_____

_____

_____

_____

_____

_____ DEADLINE: _____

CAREGIVER CONCERNS: _____

_____

_____

_____

MONITOR: _____ CAREGIVER: _____

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APPENDIX I

LETTER OF PRAISE - AREA SUPERVISOR

LATCHKEY

MEMORANDUM

DATE: February 19, 1986 **COPIES TO:** Jean Cook
Personnel File

TO: Madeline Rose, Site Manager

FROM: Rod Stanford, Area 2 Supervisor

SUBJECT: Family Day Care Homes

You are to be commended for your efforts in developing and maintaining a high quality program in Latchkey's family day care system.

This has been reflected by the recent program quality assessment that found your system to rate above standards required.

Congratulations for a job well done.

rc

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APPENDIX J

CHILD CARE PROVIDERS' GENERAL REQUIREMENTS FOR COMMENDABLE STATUS

CHOOSEABLE STATES

EDUCATION: 6 College Credits in Early Childhood Education

TRAINING: High School Graduate: 10 approved hours

Elementary Education: 20 approved hours

Acceptable Training:

Twenty Hour State Child Care Course

College Credit Courses in Early Childhood Ed.

Certificate of Training from a Child Care Institute.

Inservice Credits documented by the trainer

Attendance at professional workshops and conferences

EXPERIENCE: 2 years experience

Acceptable Experience:

F.D.C.H. Provider - over two years.

Preschool experience as an aide or teacher

Recreation experience with infants/preschool age in a camp or center

Aide or Teacher in an Infant Center.

Volunteer service in a church nursery or equivalent babysitting service.

ENVIRONMENT: Exceeds licensing requirements on a facility.

Acceptable Standards:

Home in good repair

Neat and Clean

Yard free of Hazards

Safety Features

Child - oriented

EQUIPMENT AND SUPPLIES: See Worksheet Attached

PROGRAM, SCHEDULE AND EXAMINATION:

See Attached:

Custodial Care Provided

Developmental Activities Provided

Verbal Examination (pass - 80%)

Written Examination (pass 80%)

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CHILD CARE PROVIDERS' EQUIPMENT REQUIREMENT

CATEGORY	QUALIFIED	COMMENDABLE	EXCEPTIONAL
Infant Furnishings	Crib or Playpen High Chair or Feeding Table Potty Covered Diaper Pail	Baby Carrier Changing Table Baby Bath Tub Fun Rug or Mat Infant Swing	Stroller Walker Infant Mirror
Toddler Furnishings	Table and Chairs Individual Sheets Individual Towels and Wash Cloths or Disposables	Cots Step Stool Stacking Crates for Storage	Storage Shelves and Storage Trays Bulletin Board Easel Blackboard
Infant Play	Crib Mobile Squeeze Toy Teething Ring Rattle Ball Stacking Toy	Crib Gym Activity Center Stuffed Toy Cloth Blocks Bath Tub Toys	Tyke Bike Baby's First Car Tic Toc Clock Rolling action Toys Stack and Fit Toys
Toddler Play	Playground Balls - 2 Jumbo Crayons - 2 boxes Drawing Paper - 2 pkgs. Paste-2 Bottles or Jars Picture Story Book - 2 Finger Paint - 3, red, yellow, blue Coloring Books - 2 Smocks - 1 per child Dolls - 2 Stuffed Animals - 2 Play Doh - 2 cans Riding Toy - 1 Building Blocks - 1 set Stacking Toy - 1 Push Toy - 1 Pull Toy - 1 Puzzles - 2 (4 pieces)	Wooden or Heavy Plastic Cars or Trucks - 2 Record Player or Tape Recorder - 1 Records or Tapes - 2 Riding Toys - 2 Puzzles - 4 (4 pieces) Duplo Building Set or Equivalent - 1 Dolls - 3 Stuffed Animals - 3 Picture Story Books - 3 Coloring Books - 3 Stacking Toys - 2 Sand Box	Doll Crib Musical Instrument Set - 1 Poster Paint - 3, red, yellow, blue Riding Toys - 3 Outdoor Play Gym Tunnel Picture Story Books - 4 Coloring Books - 4 Sand/Water Table Paint Brushes - 2

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CHILD CARE PROVIDERS' ORAL ASSESSMENT FOR COMMENDABLE STATUS

1. A child has been busily engaged in Sand and Water Play. The parent arrives early to pick up the child and is upset over his dirty and wet appearance. She threatens to report you for neglect and remove the child from your care. What would you say to the parent?
2. You are conducting indoor activities with the children in your care when some relatives arrive for an unexpected visit. They sit in the room where the activities are taking place, smoke cigarettes, drink beer and turn on the TV. How would you handle this situation?
3. Two toddlers are playing with some blocks on the floor. A third child pushes one of the toddlers away and takes his blocks. The toddler becomes angry and bites the other child, breaking the skin. The injured child responds with a loud wail. What steps would you take to effectively deal with this incident?
4. A parent who is bringing a child to your home for the first time asks the following questions:
    - What do you serve for breakfast, lunch and snack during the week?
    - What types of activities do you provide for the children?
    - Do you have field trips?
    - What do you do in the event that a medical emergency occurs?
    - What would you do if some unauthorized person attempted to pick up the child?

    How would you respond to these questions?

CHILD CARE PROVIDERS' WRITTEN ASSESSMENT

Pre-test _____

Post-test _____

Answer all questions true or false.

1. When a child misbehaves, it is permissible to punish the child by slapping, spanking or shouting at the child. True___ False___
2. When you have four or five children in your care, it is acceptable to give each child individual attention. True___ False___
3. When a child throws his food at another child, or on the floor during mealtimes, the child should be placed in "time out" and not permitted to finish his meal. True___ False___
4. Children should be allowed to watch television during the day except during mealtimes, outdoor play periods and nap time. True___ False___
5. Parents should pick their children up before closing time and not waste any of your time by engaging you in conversation concerning their child's activities during the day. True___ False___
6. A planned program of activities for infants and toddlers should be part of the daily schedule for children in your care. True___ False___
7. Knowledgeable caregivers hold frequent conservations with infants. True___ False___
8. Every child in your care should have a special place to keep his personal things. True___ False___
9. When you have guests visit your home during the day, the children should be sent to another part of the house to play. True___ False___
10. A caregiver should not interfere when children fight. Children should settle their own differences. True___ False___
11. The use of separate utensils for each child in your home is not necessary because all children have the same childhood diseases and will become ill anyway. True___ False___
12. All children should have an assigned place to nap which is clean and sanitary. True___ False___
13. If a toddler soils his diaper after you have told him to use the potty when he has the urge to deficate or urinate, you should make him wear the soiled diaper for the remainder of the day. True___ False___
14. If a child hits you, you may hit him back. True___ False___
15. A knowledgeable caregiver has a sufficient supply of age appropriate toys for infants and toddlers in her care. True___ False___
16. If a child becomes ill during the day, a knowledgeable caregiver will notify the parent immediately and isolate the child from the rest of the children. True___ False___
17. Colicky babies who cry often, and for long periods of time, are suffering from a disease. True___ False___
18. Infants should be fed and kept in their cribs during the day except for an occasional trip in a stroller, so that they will have the necessary sleep they need to grow. True___ False___
19. Knowledgeable caregivers place a mobile on the side of the infant's crib. True___ False___
20. You should listen to a child when he tells you a story. True___ False___

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APPENDIX K

TRAINERS' SCHEDULES

DAILY SCHEDULE

Assistant Site Manager
Family Day Care Homes

Working Hours: 8:00 -5:00

1st and 3rd. weeks

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Caregiver 1 Caregiver 2	Caregiver 3 Caregiver 4	Meeting - Office 74th St. North 10:00 - 12:00 a.m.	Caregiver 5 Caregiver 6	Caregiver 7 Caregiver 8
Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00
Office Duties	Caregiver 9 Caregiver 10	Caregiver 11 Office Duties	Caregiver 12 Caregiver 13	Office Duties

2nd and 4th weeks

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Caregiver 14 Caregiver 15	Caregiver 16 Caregiver 17	Meeting - Office 74th St. North 10:00 - 12:00 a.m.	Caregiver 18 Caregiver 19	Caregiver 20 Caregiver 21
Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00
Office Duties	Caregiver 22 Caregiver 23	Caregiver 24 Office Duties	Caregiver 25 Caregiver 26	Office Duties

5th week

Intake & Redetermination
Screening of new caregivers and homes
Unscheduled visits to homes

DAILY SCHEDULE

Site Manager
Family Day Care Homes

Working Hours: 8:00 - 5:00

1st and 3rd. weeks

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Office	Office	Meeting - with Assistant 10:00 - 12:00 a.m.	Office	Caregiver 1 Caregiver 2
Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00
Caregiver 3 Caregiver 4 Caregiver 5	Caregiver 6 Caregiver 7 Caregiver 8	Caregiver 9 Caregiver 10	Caregiver 11 Caregiver 12	Direct Services Off. 1-3 Curriculum 3-5 Operations

2nd and 4th weeks

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Office	Office	Meeting - with Assistant 10:00 - 12:00 a.m.	Office	Office
Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00	Lunch 12:00-1:00
Office	Office	Office	Office	Direct Services Off. 1-3 Curriculum 3-5 Operations

5th week

Planning for special programs - in-service days, baby fairs, etc.
Screening of new caregivers and homes
Unscheduled visits to homes

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APPENDIX L

SUMMARY OF TRAINING
DECEMBER 1985

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CENTER SUMMARY OF TRAINING
Year Ending, 1985

Center: Latchkey F.D.C.H.

Name	Position	Date of Hire	Hours Worked Wkly.	C/NC	Training Hours Required	Training Hours Completed	Requirement Completed Yes/No	Date CDA Cert Issued	Comments
1.	FDCH	02/22/84	40.0000	NC	20.0000	22.0000	YES		
2.	FDCH	09/11/84	40.0000	NC	20.0000	22.0000	YES		
3.	FDCH	06/19/85	40.0000	C	5.00000	5.00000	YES		
4.	FDCH	07/01/84	40.0000	NC	20.0000	21.0000	YES		
5.	FDCH	11/01/82	40.0000	NC	20.0000	38.5000	YES	06/30/85	CDA EXPIRE 6/30/85
6.	FDCH	02/28/84	40.0000	NC	20.0000	20.0000	YES		
7.	FDCH	10/15/82	40.0000	NC	20.0000	20.0000	YES		
8.	FDCH	11/05/82	40.0000	C	10.0000	17.0000	YES		
9.	FDCH	07/01/84	40.0000	C	10.0000	18.0000	YES		
10.	FDCH	09/17/84	40.0000	NC	20.0000	27.0000	YES	06/30/85	CDA EXPIR 6/30/85
11.	FDCH	09/01/83	40.0000	NC	20.0000	20.0000	YES		
12.	FDCH	01/01/83	40.0000	NC	20.0000	22.5000	YES		
13.	FDCH	11/01/82	40.0000	NC	20.0000	20.0000	YES		
14.	FDCH	05/06/85	40.0000	C	5.00000	10.0000	YES		
15.	FDCH		40.0000	NC	20.0000	20.0000	YES		
16.	FDCH	06/22/84	40.0000	NC	20.0000	22.0000	YES		
17.	FDCH	09/01/83	40.0000	NC	20.0000	20.0000	YES		
18.	FDCH	11/11/82	40.0000	NC	20.0000	22.0000	YES		
19.	FDCH	10/10/82	40.0000	NC	20.0000	21.5000	YES		
20.	FDCH	10/12/84	45.0000	C	10.0000	12.0000	YES		
21.	FDCH	05/21/84	40.0000	C	10.0000	2.50000	NO		
22.	FDCH	11/01/84	50.0000	NC	20.0000	27.0000	YES		
23.	FDCH	02/14/83	40.0000	NC	20.0000	20.0000	YES		
24.	FDCH	12/21/84	40.0000	C	10.0000	22.0000	YES		
25.	FDCH	12/22/82	40.0000	NC	20.0000	16.0000			
	SUPERVISOR	02/28/82	40.0000	C	20.0000	38.5000	YES	06/30/85	CDA EXPIR
26.	FDCH	08/22/84	40.0000	C	10.0000	18.0000	YES		
27.	FDCH	09/07/84	40.0000	C	10.0000	20.0000	YES		
28.	FDCH	04/01/82	40.0000	C	7.50000	13.5000	YES		
29.	FDCH	06/24/85	40.0000	NC	10.0000	13.5000	YES		
30.	FDCH		40.0000	C	10.0000	44.0000	YES		
31.	FDCH	01/07/83	40.0000	NC	20.0000	20.5000	YES		
32.	FDCH	12/28/82	40.0000	NC	20.0000	21.5000	YES		
33.	FDCH	04/24/83	40.0000	NC	20.0000	20.5000	YES		

DON'T FORGET to DOCUMENT all your training efforts

Please call Peggy, 581-7124, if you need changes to be made on this printout. Thank you.

LATC-RED. Inc 6/85

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APPENDIX M

NEWSLETTER

news for: THE OTHER MOTHER
A Monthly Publication of
Family Day Care Home Network
Published Through Latchkey, Inc.

March, 1986

WELCOME ABOARD!

The Family Day Care Staff would like to introduce Rod Stanford, Latchkey Area 2 Supervisor, to all our caregivers. He will occasionally accompany us to visit your homes. When he gets to know all of you better, he may drop in at any time to say hello. Please join us in welcoming him to the staff of Latchkey, Services for Children, Inc. The phone number for the Area 2 Office is 345-0960.

WORDS OF PRAISE

So many of you are doing such a good job caring for the children in our program. We want to say thank you and keep up the good work! We have a special thank you for Katie Diggs and Ruline Potts. They had a surprise visit from Nancy Stefano who is the Contracts Manager for Latchkey Central Agency. They both received a high rating and we're very pleased with them.

HAPPY EASTER

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MONITORING OBSERVATIONS

During routine monitoring, we see homes with children who move around the home, laugh, play and interact with the caregiver. We can tell that the child feels safe and loved in the home. In some homes we see children who just sit, don't interact with caregiver or even each other. These children obviously do not feel secure or happy in the home. Many of our caregivers say they love working at home. Please remember you are working. Your job is to love and care for children. Turn off your TV's during activity time and talk to your children. Play with the children, enjoy them and see that they enjoy themselves.

ATTENTION ALL CAREGIVERS

On March 20th, all caregivers are to take the time to check ALL of their children's folders for their parents' home phone, work phone, school phone numbers as well as their emergency numbers. Too often we find that when we need these numbers they are not current. If you find any numbers that need to be corrected, do so, and call the office and let us know too.

REMINDERS

When you contracted with Latchkey you agreed to provide service every day of the year except for holidays, inservice days and weekends. The parents of the children in your care are either employed or are students in school, and therefore need child care on a daily basis. If it is necessary to deny them service due to an emergency, please contact the office so we can find an alternate home for the day.

Remember our inservice day on March 21st. Remind parents that you will not be available for care on that day. Make your arrangements for transportation. No one will be excused. See you there!

Do we need to remind you that on March 28th all homes will be closed on Good Friday? We didn't think so.

Caregivers, we would appreciate it if you would let us know when a substitute caregiver is going to be in your home. We hope it is not necessary to have one too often. Please use a responsible caregiver who is over 18 years of age and preferably has some child care experience. Remember substitutes are required to have a current TB test. Please make arrangements to take care of your personal business and chores during naptime or free time.

HRS

equal opportunity employer

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APPENDIX N

PARENT SATISFACTION SURVEY

PARENT SATISFACTION SURVEY

Please answer yes or no to the following questions:

1. Do you have a good relationship with your child's caregiver? Yes___ No___
2. Do you and your child's caregiver communicate effictively? Yes___ No___
3. Does your child's caregiver follow through when you give her specific instructions regarding the daily needs of your child? Yes___ No___
4. Does your child's caregiver help in teaching values that you want your child to learn? Yes___ No___
5. Are the behavior standards set by your child's caregiver realistic for your child? Yes___ No___
6. Are discipline procedures established by your child's caregiver appropriate and acceptable to you? Yes___ No___
7. Do you feel that your child is receiving good custodial care? (feeding, napping, toileting, diaper changing) Yes___ No___
8. Do you feel that your child's developmental (cognitive/social/emotional/physical) needs are being met? Yes___ No___
9. Are your child's health and nutritional needs being met? Yes___ No___
10. Is the environment provided by the caregiver for your child safe, clean and orderly? Yes___ No___
11. Is your child's caregiver a kind, loving and nurturing person? Yes___ No___
12. Is your child's caregiver reliable and dependable? Yes___ No___
13. Does your caregiver have sufficient and suitable equipment and supplies in the home? Yes___ No___
14. Does your child's caregiver provide enough personal attention for your child? Yes___ No___
15. Does your child like the caregiver and enjoy being in the home? Yes___ No___
16. Does your child's caregiver provide adequate supervision? Yes___ No___
17. Does the caregiver share your child's daily experiences with you at pick-up time? Yes___ No___
18. Does your child's caregiver respect you and your child? Yes___ No___
19. Are you generally satisfied with the quality of care your child is receiving from the caregiver? Yes___ No___
20. Would you recommend your child's caregiver to a friend? Yes___ No___

COMMENTS: _____

_____

_____

_____

_____ _____

Signature of Parent Date

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Please turn to reverse side.

APPENDIX O

INSERVICE DAY PROGRAM
NOVEMBER 1985

WORKSHOP ROTATION

GROUP 1

Gail Baldwin	Carolyn Johnson
Pamela Fisher	Evelyn Lockett
Annie Hardy	Maunyon Mitchell
Alberta Hilton	Sampara Roesar
Queen Hodge	Terry Walters
Juanita Hunter	Betty Williams
Tracy Jackson	

GROUP 2

Gertrude Abrams	Barbara Hickey
Ethel Allen	Mary Holton
Blanche Boyd	Linda Slue
Jacqueline Dobose	Estella Tunstil
Myrtle George	Irene Westley
Jacqueline Graham	Thelma Wright

GROUP 3

Katie Diggs	Pam Miller
Verlie Gordon	Annie Myrick
Alaxon Hamilton	Rudine Potts
Belinda Jackson	Mattie Roberts
Imell Johnson	Emma Stewart
Effie Lowe	Sharon Wallace
Jeannette McCarter	

F.B.C.H. STAFF

Madeline Rose	Site Manager
Liza Jamison	Assistant Site Manager
Linda Berzinc	Secretary

SPECIAL GUESTS

Jewell Edwards	Licensing Specialist Pinellas County License Board
Dorothy Gilmore	Nutritionist Coordinator Project Playpen
Sandy Rounds	Contracts Manager Latchkey, Inc.

PRESENTERS

Liza Jamison	Assistant Site Manager F.B.C.H.
Pam Miller	Caregiver
Nancy Otte	Training/Program Director Latchkey, Inc.
Madeline Rose	Site Manager F.B.C.H.

ACKNOWLEDGEMENTS

Mary Swolenski	Operations Director
Jane Thomas	Executive Secretary

SPONSORED BY LATCHKEY, INC.

Linda Morlock	Executive Director
Joan Cook	Deputy Executive Director
Stephen Hartley	Finance Director

LATCHKEY

INSERVICE DAY

Family Day Care Home

Network

November 1, 1985

First Christian Church
1645 Seminole Boulevard
Largo, Florida 33541

PROGRAM

8:30-9:15	Registration Coffee
9:15-9:30	Greeting
9:30-11:00	General Meeting
11:00-12:00	Business Meeting
12:00-1:30	Lunch
1:30-2:20	Workshop I Learning Activities
2:25-3:10	Workshop II Music for Infants and Toddlers
3:10-4:00	Workshop III Child Development

WORKSHOP ROTATION

1:30-2:20	Workshop I	Group 1
	Workshop II	Group 2
	Workshop III	Group 3
2:25-3:10	Workshop I	Group 2
	Workshop II	Group 3
	Workshop III	Group 1
3:10-4:00	Workshop I	Group 3
	Workshop II	Group 1
	Workshop III	Group 2

Please Note: Your group assignments are on the back page of the program.

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APPENDIX P

BABY FAIR - OCTOBER 1985

MEASE HEALTH CARE

P.O. Box 790
Dunedin, Florida 34697-0790
813 733-1111

December 17, 1985

Ms. Madeline Rose
Latchkey
2431 Heron Terrace A101
Clearwater FL 33520

Dear Ms. Rose:

It hardly seems possible that six weeks have passed since the Mease Baby Fair. We certainly appreciate your agency's participation, especially the time and energy you devoted to creating your display and meeting with parents. We also hope you will make plans to participate in next year's Baby Fair as we hope to make it an annual event at Mease.

For your records, I'd like to share some follow-up data with you:

20 community child-serving agencies participated.

800 persons attended the event, including 250-300 babies and their siblings.

Parents were most positive in their comments and particularly liked the handouts.

A number of agencies reported referrals resulting from the event.

I hope you will share with me any ideas (and complaints) you may have on how we can improve next year's event. A short evaluation form is enclosed for your convenience.

Sincerely,

Sandra Gourdine

Sandra Gourdine
Community Relations Department

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APPENDIX Q

CLIENT CONTROL SHEET

CAREGIVER: _____

Phone: _____

CLIENT CONTROL SHEET

ENR. DATE	CHILD'S NAME	PARENT NAME	Child's ID	Income Verification	Emergency Treatment	Fee Policy Letter	Fee Schedule	Application Fee	Client Assessed Fee	Registration 1st Week Fee	Group Attend. Sheets	Reimbursement Report	Vacation Weeks Taken	Date Of Birth	Physical Date	DPT	MMR	Polio		Transferred To	Termination Date	Clear Up Fees	Monthly Client Term. List	Family Ledger Adjust. Form	Reimbursement Report		

APPENDIX R

SAMPLE ACTIVITY CARDS

ACTIVITY CARD 1

Age 8 - 12 months

A. Encourage baby to pull himself up by placing toys on top rail of playpen.

B. Place a toy on a blanket out of his reach so that he can pull blanket toward him and grasp toy.

C. Let baby watch you place a toy behind a screen so that he can retrieve it.

D. Hide a toy under a blanket while he is watching. Let him lift the blanket and find the toy.

Readiness Skills: Able to pull to a standing position
Learning that objects exist even though they can't be seen

Purpose: Develop understanding of object permanence and increase large motor skills.

ACTIVITY CARD 2

Age 1 - 4

A. Rub the baby's arms and legs with different types of materials so that he can feel different textures such as velvet, terry cloth and satin.

B. Move a colorful doll in and out, back and forth, in front of baby as he lies on his back so that he will follow it with his eyes. Eventually when you move it out of his field of vision, his gaze will remain fixed at the point where it disappeared.

C. Shake a bell or rattle in baby's room to encourage him to look for its source.

Readiness Skills: Follow an object with his eyes.
Hear sounds and locate them by looking in the direction of the sound.
React to different textures when placed in his hands which are now open most of the time.

Purpose: To give the baby the experience of listening to different types of sounds, feeling different textures and looking at different objects in space.

ACTIVITY CARD 3

Age 12 - 18 months

A. Make a long pull train out of empty boxes. Paint them different colors. Attach a string to the first box and let baby pull it.

B. Throw a soft ball up the stairs and let it land on a step. Baby will climb up to get it.

C. Give the baby different size blocks to stack.

D. Take him on a nature walk in the yard and let him fill a pail with rocks, flowers, leaves, twigs and other things of interest that he finds.

Readiness Skills: Walking
Pulling
Stacking objects
Picking up objects and placing them in a container

Purpose: To encourage problem solving
To give him practice in balancing
To parallel the emptying schema with the filling schema
To give him the opportunity to use his walking skill to explore his world.

ACTIVITY CARD 4

Age 4 - 8 months

A. Keep a collection of small toys in the crib so that the baby will learn to tell them apart.

B. Bounce a ball up and down so that he will follow it with his eyes.

C. Play a music box, turn on the TV, ring the doorbell so that baby will turn his head toward the direction of the sound.

D. Cut large containers in half and line them with different fabrics. Place toys inside so that he can feel the different textures as he retrieves the toys.

E. Encourage hand feeding during meals. Let him pick up bits of carrot, peas, hamburger, etc. from his tray.

Readiness Skills: Eye-hand coordination
Turn head toward a sound
Retrieve toys from a container
Respond visually to his environment

Purpose: To increase his fine motor skills
To heighten his awareness of the position of objects in space.

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